

*Kelly Conrad Green II v  
Corizon Health, Inc., et al.*

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*Justin Montoya, MD  
April 18, 2014*



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IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF OREGON  
EUGENE DIVISION

KELLY CONRAD GREEN, II, an )  
individual, by and through his )  
guardian ad litem Derek )  
Johnson, )  
Plaintiff, )  
v. )No. 6:13CV01855-TC  
CORIZON HEALTH, INC., a )  
Tennessee Corporation; et al., )  
Defendants. )

DEPOSITION OF JUSTIN MONTOYA, M.D.  
April 18, 2014  
Friday  
9:18 A.M.

THE VIDEOTAPED DEPOSITION OF JUSTIN  
MONTOYA, M.D., was taken at CC Reporting and  
Videoconferencing, 172 East 8th Avenue, Eugene,  
Oregon, before Sara Fahey Wilson, CSR, Certified  
Shorthand Reporter in and for the State of Oregon.

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Reported by:

SARA FAHEY WILSON, CSR

CC REPORTING & VIDEOCONFERENCING

EUGENE 541/485-0111

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<p>1 Clinic in Junction City, Oregon, and worked there 2 until approximately 2010. 3 Q. During those eight years or so was that 4 your only employment? 5 A. I worked as a wound care and hyperbaric 6 medicine physician at McKenzie-Willamette Wound Care 7 Center. 8 Q. When did you start there, approximately? 9 A. 2009-ish, approximately. I also worked at 10 Eugene Urgent Care around 2009 as well on a per diem 11 basis, and I worked at Sacred Heart RiverBend 12 Hospital in the emergency room on a per diem basis. 13 Q. Starting approximately when? 14 A. Around the same time. 15 Q. Your job at Junction City Medical Clinic, 16 was that a full-time position? 17 A. Yeah. 18 Q. Then did something happen in 2009 that you 19 started picking up these per diems? What occurred? 20 A. Trying to put money away for the kids' 21 college. 22 Q. So nothing changed with the Junction City 23 Medical Clinic. You just started working more jobs? 24 A. A little extra. 25 Q. Okay. What is Soul Wrap Designs?</p>	<p>1 then I started my own clinic two years ago, 2 ProHealth Family Medicine. 3 Q. Okay. Does that pretty much cover it? 4 A. Yeah, except for volunteer work, pretty 5 much. 6 Q. So when did you first do any work with 7 Corizon? 8 A. I don't recall the specific date. 9 Q. Do you remember the year? 10 A. Sometime in the last few years. 11 Q. Were you the first medical director at the 12 Lane County Jail for Corizon? 13 A. I don't know for sure. I believe I was, 14 but I don't know for sure. 15 Q. Who is Sara Sheffield? 16 A. I don't know. 17 Q. Do you have an employment relationship 18 with her? 19 A. No. 20 Q. When I looked on the business directory 21 for Oregon, there's -- a Justin Montoya, M.D., LLC, 22 is listed and I noticed that's how you signed the 23 contract with Corizon. When did you form the LLC? 24 A. I don't know. Somewhere around 2009, 25 probably. 2008. 2010.</p>
Page 10	Page 12
<p>1 A. That was a tie company that I had started. 2 Q. Like neck tie? 3 A. Uh-huh. 4 Q. And -- 5 A. Extreme sport-based neck ties: rock 6 climbing, mountain biking. 7 Q. And when did you start that, 8 approximately? 9 A. I don't know. 10 Q. Is that still operating? 11 A. No. 12 Q. When did it go out of business? 13 A. Couple years ago. 14 Q. Prior to the time you became the 15 medical -- 16 A. Did you want the rest of my medical or 17 employment history? 18 Q. I'm sorry. I thought you were done. 19 A. After I left there, I worked 20 more regularly at the wound care clinic. 21 Q. After you left -- 22 A. Junction City. 23 Q. Okay. 24 A. And I also worked at the University of 25 Oregon Student Health Center for a couple years, and</p>	<p>1 Q. And is this the entity that you did all of 2 your medical practice through at -- from the time 3 after you formed it? 4 A. That's where I work as an independent 5 contractor, so when I work at Corizon, when I worked 6 at the urgent care, it was through that. 7 Q. So do you have -- are you still working 8 for Corizon? 9 A. I still work at the jail. 10 Q. Okay. 11 A. I'm not an employee. 12 Q. You're an independent contractor? 13 A. I'm an independent contractor. 14 Q. Right. So currently how many hours a week 15 are you working at the jail? 16 A. I work four hours a week. I work 17 additional hours on call. I work additional hours 18 attending meetings. 19 Q. Is 3683 Walton your home address? 20 A. Yes. 21 Q. And that's the business address that you 22 list for your LLC? 23 A. For which LLC? 24 Q. Do you have more than one? 25 A. My company -- my clinic is also a separate</p>

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<p style="text-align: right;">Page 17</p> <p>1 A. No.</p> <p>2 Q. When you were hired -- let's see. I've</p> <p>3 got the agreement here to help us out.</p> <p>4 (Deposition Exhibit No. 119</p> <p>5 marked for identification.)</p> <p>6 <b>BY MR. ROSENTHAL:</b></p> <p>7 Q. Marking as Exhibit 119, your independent</p> <p>8 contractor agreement that you entered into with</p> <p>9 Corizon. I'm not quite sure why there's two copies</p> <p>10 here. They were produced to me this way. They look</p> <p>11 to me to be the same. But if you look on page 7 of</p> <p>12 the document, it looks like you signed this</p> <p>13 agreement in October of 2012.</p> <p>14 My first question is, do you remember who</p> <p>15 first contacted you about the position with Corizon?</p> <p>16 A. No.</p> <p>17 Q. Do you remember how you found out about</p> <p>18 the opportunity?</p> <p>19 A. Somebody contacted me.</p> <p>20 Q. So this is not something that you reached</p> <p>21 out for? Somebody reached out for you?</p> <p>22 A. Yes.</p> <p>23 Q. And do you recall how long a process it</p> <p>24 was from the time that first call occurred until you</p> <p>25 actually signed the contract?</p>	<p style="text-align: right;">Page 19</p> <p>1 A. Yes.</p> <p>2 Q. Now, when you first entered into the</p> <p>3 agreement, was it your understanding that your work</p> <p>4 would be right around four hours a week?</p> <p>5 A. Yes.</p> <p>6 Q. And did it stay that way at four hours a</p> <p>7 week, or did it -- did it get enlarged into more</p> <p>8 hours as you started the job?</p> <p>9 A. As I mentioned previously, I worked there</p> <p>10 four hours a week. I also attend meetings</p> <p>11 occasionally and I take call.</p> <p>12 Q. Were you on call 24/7 when you started?</p> <p>13 A. I don't recall.</p> <p>14 Q. Are you currently on call 24/7?</p> <p>15 A. Define "on call."</p> <p>16 Q. Does Corizon expect you to be available to</p> <p>17 the telephone if you're needed at the jail?</p> <p>18 A. No.</p> <p>19 Q. Is there a particular schedule you have as</p> <p>20 to when Corizon expects you to be available to take</p> <p>21 phone calls? Is that certain days of the week? Is</p> <p>22 there some system?</p> <p>23 A. Yes.</p> <p>24 Q. Could you explain that to me, please?</p> <p>25 A. Myself, Kris White, Dr. Calder, alternate</p>
<p style="text-align: right;">Page 18</p> <p>1 A. No.</p> <p>2 Q. Do you have a ballpark on it? I mean, was</p> <p>3 it a week or two, or was it a few months?</p> <p>4 A. Somewhere between there, I suppose.</p> <p>5 Q. I can't -- the signature, if you look on</p> <p>6 page 7, I can't read the signature of the person</p> <p>7 from Corizon that signed it. Do you recall who you</p> <p>8 signed the contract with at Corizon?</p> <p>9 A. No.</p> <p>10 Q. Was there a Mr. Legg involved?</p> <p>11 A. Yes.</p> <p>12 Q. Was he the person who you kind of made</p> <p>13 your verbal deal with prior to having the contract</p> <p>14 prepared and signed?</p> <p>15 A. Yes.</p> <p>16 Q. Was there a Ms. Garcia involved in the</p> <p>17 process?</p> <p>18 A. I don't recall.</p> <p>19 Q. Was there a Mr. Hyppolite involved in the</p> <p>20 process?</p> <p>21 A. I'm familiar with that name. I don't</p> <p>22 believe he was involved in that process.</p> <p>23 Q. So your best recollection is, is that your</p> <p>24 discussions were with Mr. Legg leading up to the</p> <p>25 signing of the contract?</p>	<p style="text-align: right;">Page 20</p> <p>1 on a varying basis who is the primary person who</p> <p>2 takes phone calls.</p> <p>3 Q. Dr. Calder is a new name to me. When did</p> <p>4 he start with Corizon, approximately, at the Lane</p> <p>5 County Jail?</p> <p>6 A. Sometime within the past year, I believe.</p> <p>7 Q. Was -- do you know whether he was involved</p> <p>8 at the Lane County Jail in February of 2013?</p> <p>9 A. I don't know specifically when he came on,</p> <p>10 but I don't believe so.</p> <p>11 Q. Is he a family practice doc also?</p> <p>12 A. I don't know what his credentials are. He</p> <p>13 practiced primarily diabetes care. I don't know if</p> <p>14 he's family practice or internal medicine other than</p> <p>15 that.</p> <p>16 Q. Does he do -- have clinic hours at the</p> <p>17 jail now?</p> <p>18 A. Yes.</p> <p>19 Q. How many hours a week does he go into the</p> <p>20 jail?</p> <p>21 A. Four.</p> <p>22 Q. Did that -- did he get involved at the</p> <p>23 Lane County Jail when the jail population jumped up?</p> <p>24 I know that they were running 200, 220, and then</p> <p>25 there was a time when it jumped up into the 300s.</p>

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<p style="text-align: right;">Page 49</p> <p>1 Q. I'm sorry. I must have misinterpreted 2 what you told me. Did -- when you do the annual 3 reviews of -- when was the last time you 4 did an annual review of Ms. White? 5 A. In the fall, I believe. 6 Q. Fall of what? 2013? 7 A. Yes. 8 Q. And how did you evaluate her? What was 9 your review? 10 A. Could you clarify the question? 11 Q. I'm not sure what terms Corizon asks you 12 to use, whether it's a grading system or just some 13 kind of a descriptive system, but I'd like to know 14 what you concluded in terms of her review. 15 A. I concluded that she was competent to do 16 her job. 17 Q. Did you have the opportunity to give her a 18 higher rating than competent? 19 A. No. 20 Q. So is that the highest rating you could 21 have given her? 22 A. There was really no descriptor one way or 23 another. I gave her a good review. Satisfactory 24 review. I did not give her a negative review. 25 Q. When you go to the jail to meet with</p>	<p style="text-align: right;">Page 51</p> <p>1 than Wednesday morning? 2 A. 32 hours a week total, I believe. 3 Q. Was she usually there in the jail on 4 Tuesdays? 5 A. Yes. 6 Q. Did you have anything to do with approving 7 her overtime if she worked overtime? 8 A. No. 9 Q. Do you have any knowledge one way or the 10 other as to whether she was encouraged to work 11 overtime or discouraged from working overtime? 12 A. No. 13 Q. In an average week how often does she call 14 you for guidance? 15 A. It's very variable. I would say a few. 16 Q. So let me put it in my words and you tell 17 me if this is fair. In a normal week you would 18 expect that she would be calling you more than one 19 time for guidance? 20 A. Yes. 21 Q. Did you expect her to contact you if there 22 was a medical emergency in the jail? 23 A. Not always. 24 Q. Did you consider her, in February of 2013, 25 competent to diagnose whether a patient had suffered</p>
<p style="text-align: right;">Page 50</p> <p>1 patients, does Ms. White accompany you on the rounds 2 in the jail? 3 A. Occasionally. 4 Q. But usually not? 5 A. Occasionally. 6 Q. All right. So is it fair for me to say 7 that usually when you do rounds Ms. White is not 8 with you? 9 A. It varies. Sometimes we will spend more 10 of the portion of time seeing people together. 11 Other times we will be seeing people more 12 independently. That would vary depending on the 13 number of people that we're trying to see, the 14 acuity of the people that we're trying to see, the 15 location of the people that we're trying to see, and 16 specific questions or concerns regarding their care, 17 their plan of care, that type of thing. So it 18 really would vary. 19 Q. You usually worked Wednesday morning. Is 20 that right? 21 A. Correct. 22 Q. Did -- was Ms. White usually there on 23 Wednesday morning when you were there? 24 A. Yes. 25 Q. Do you know what her schedule was other</p>	<p style="text-align: right;">Page 52</p> <p>1 a closed head injury? 2 A. Yes. 3 Q. Did you consider her competent in 2013, 4 February of 2013, to diagnose whether a patient had 5 a subdural hematoma? 6 A. I don't think that's probably a fair 7 question. Subdural hematoma for definitive 8 diagnosis usually would require a CAT scan, which we 9 did not immediately have available in the jail. So 10 that's usually something that gets confirmed in an 11 emergency room or imaging center that has those 12 capabilities. 13 Q. What would your expectations have been in 14 February of 2013 as to what Ms. White should do if 15 she suspected the possibility of a subdural 16 hematoma? 17 A. If she suspected the possibility of a 18 subdural hematoma, would be to get a CAT scan. 19 Q. If Ms. White wanted to refer a patient out 20 for a CAT scan on an emergency basis, would you 21 expect that you would be involved in any way in that 22 process? 23 A. It would depend on the clinical 24 circumstances. 25 Q. Well, if a patient had run into a concrete</p>

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1 **MR. COLEMAN:** Let's go off the record  
2 while Mr. Rosenthal is marking and then we'll go  
3 back on.  
4 **THE VIDEOGRAPHER:** We're off the  
5 record.  
6 (Recess: 10:36 to 10:41 a.m.)  
7 **THE VIDEOGRAPHER:** Okay. We're back  
8 on the record. The time is 10:41.  
9 (Deposition Exhibit No. 121  
10 marked for identification.)  
11 **BY MR. ROSENTHAL:**  
12 **Q.** I'm handing you what I've marked as  
13 Exhibit 121, and these, as I mentioned before the  
14 break, were produced to me by defense counsel. So  
15 looking at the first page here of Exhibit 121, is  
16 this, in February, how you were submitting your time  
17 to Corizon for pay? Is this the kind of form you  
18 were using?  
19 **A.** Page 3 and 4 would really be what I would  
20 consider to be my time sheet for pay. Page 1, 2,  
21 and 5 would be more of a documentation of what  
22 occurred throughout the day.  
23 **Q.** So why would you keep the document that is  
24 page 1 of Exhibit 121? What was your purpose in  
25 keeping that information?

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1 **A.** Because they requested it.  
2 **Q.** Who requested it?  
3 **A.** Corizon requested it.  
4 **Q.** All right. So Corizon wanted you to  
5 document how much time you spent doing -- seeing  
6 each patient. Is that the idea?  
7 **A.** Yes.  
8 **Q.** Okay. So that -- so the first page of 121  
9 you've listed the various patients that you see --  
10 their names have been redacted -- and how much time  
11 you spent with them and approximately or generally  
12 what you were doing. Is that a fair summary of  
13 this?  
14 **A.** Yes.  
15 **Q.** Okay. And is that your signature over on  
16 the lower left?  
17 **A.** Above the line that says professional  
18 signature, that's my signature.  
19 **Q.** Okay. Then on the 13th, the second page,  
20 and that -- both the 6th and the 13th were  
21 Wednesdays. So this is the same kind of  
22 documentation. And, again, is that your signature  
23 down there where it says professional signature?  
24 **A.** That is my signature.  
25 **Q.** Now, would you turn these sheets in with

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1 the semimonthly time sheet?  
2 **A.** Yes.  
3 **Q.** All right. So then on the next page, page  
4 3, do you see where it indicates that on February  
5 12th there was a MAC meeting?  
6 **A.** I see where it indicates that, yes.  
7 **Q.** All right. And is that your signature  
8 down there where it says provider?  
9 **A.** That is my signature, yes.  
10 **Q.** And did you turn this form in on February  
11 13th?  
12 **A.** I don't know what day I turned it in.  
13 **Q.** Did you sign it on February 13th?  
14 **A.** I appeared to have.  
15 **Q.** All right. So is it reasonable for us to  
16 interpret this as meaning you were in the jail on  
17 February 12th from 12:30 p.m. to 2:00 p.m. for a MAC  
18 meeting?  
19 **A.** Yes.  
20 **Q.** And is it your recollection that Ms. White  
21 was with you at that meeting?  
22 **A.** I don't recall.  
23 **Q.** Do you ever remember a MAC meeting where  
24 she wasn't present?  
25 **A.** Yes.

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1 **Q.** When was that?  
2 **A.** I don't recall.  
3 **Q.** Was it in the last six months?  
4 **A.** I don't recall.  
5 **Q.** Do you ever remember a MAC meeting where  
6 the HSA was not present?  
7 **A.** Yes.  
8 **Q.** When was that?  
9 **A.** I don't recall.  
10 **Q.** Can you give me -- can you tell me what  
11 year it was? Whether it was 2012 or 2013?  
12 **A.** No.  
13 **Q.** But normally -- usually at a MAC meeting  
14 you would be there along with the HSA and the -- and  
15 Ms. White. Is that correct?  
16 **A.** Usually, yes.  
17 **Q.** All right. So I want to return to my  
18 question about when you first heard about  
19 Mr. Green's injury. It appears that you were in the  
20 jail, and if things went as normal, Ms. White and  
21 Ms. Thomas were with you at a meeting from 12:30  
22 until 2:00 p.m.  
23 Do you have any recollection of whether  
24 they mentioned to you what had happened that morning  
25 with Mr. Green?



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<p style="text-align: right;">Page 61</p> <p>1 A. No, I don't have any recollection. 2 Q. Do you think if they had told you that 3 that morning a patient had run into a concrete wall 4 and collapsed in a pool of blood and there had been 5 an emergency and that he had been taken to the 6 infirmary in a wheelchair and had had multiple 7 stitches put into his head, do you think that you 8 would remember that? 9 A. Repeat the question. 10 MR. ROSENTHAL: Could you read it 11 back, please. 12 (The record was read back as follows:) 13 QUESTION: Do you think if they had told you 14 that that morning a patient had run into 15 a concrete wall and collapsed in a pool of 16 blood and there had been an emergency and 17 that he had been taken to the infirmary in 18 a wheelchair and had had multiple stitches 19 put into his head, do you think that you 20 would remember that? 21 A. Do I think I would remember over a year 22 later that I was told that on that particular day at 23 that particular time? 24 BY MR. ROSENTHAL: 25 Q. Yeah, that's my question.</p>	<p style="text-align: right;">Page 63</p> <p>1 refreshes your recollection, did you talk to her 2 about it the next morning? 3 A. If I knew exactly when it was, I would 4 have told you that the first time. I do not recall 5 exactly when it was. I know that we talked about 6 the case. 7 Q. What did she tell you? 8 A. I don't recall exactly specifically what 9 she told me. I know that we talked about the events 10 that occurred and how things had resulted later. 11 Honestly, I cannot tell you exactly everything that 12 we talked about in any detail. 13 Q. All right. Well, this is important to me 14 so I'm going to try to go over it with you in some 15 detail and see what aspects, if any, you do remember 16 about this. 17 A. I understand. 18 Q. When you spoke with her, did you know that 19 Mr. Green had suffered a severe spinal cord injury 20 and had had a surgery -- an emergency surgery the 21 evening of February 12th? 22 A. I believe so. 23 Q. And did you know the neurosurgeon that did 24 the surgery, Dr. Halliday? 25 A. Yes, I know Dr. Halliday.</p>
<p style="text-align: right;">Page 62</p> <p>1 A. No, I don't believe I would be able to 2 tell you exactly when that was. 3 Q. Okay. Did you review the care and 4 treatment given Mr. Green at any time with 5 Ms. White? 6 MR. COLEMAN: I'm going to instruct 7 the witness not to answer unless there was sometime 8 other than preparing a sentinel event report or when 9 an attorney was present. 10 BY MR. ROSENTHAL: 11 Q. Well, the sentinel event report wasn't 12 prepared for several weeks, so I want to know 13 whether, in the immediate aftermath of February 14 12th, in the week following February 12th, Ms. White 15 and you reviewed in any way the situation? 16 A. I believe we did. 17 Q. And where did that happen? 18 A. I don't recall. It was either by 19 telephone or at the Lane County Jail. 20 Q. Well, these events happened on Tuesday, 21 and Ms. White has testified that on Tuesday night 22 she had some kind of communication with you, and 23 that the next day or the day after you talked about 24 it. And since the next day is a Wednesday, when you 25 would normally come in, I'm wondering if that</p>	<p style="text-align: right;">Page 64</p> <p>1 Q. Have you ever spoken with her about the 2 case? 3 A. No. 4 Q. Have you ever spoken with Dr. Halliday 5 about Ms. White and why she left the neurosurgery 6 clinic? 7 A. No. 8 Q. Did Ms. White say anything to you about 9 whether or not she performed a neurologic 10 examination of Mr. Green in the courtroom when -- 11 when she first got there? 12 To put it in into context, Mr. Green ran 13 into the wall. Collapsed on the floor. There was a 14 medical alert called. And Ms. White and Ms. Fagan 15 and Joan Borgard (phonetic) have all testified that 16 they ran into the courtroom and that Ms. White was 17 in charge of the case in the courtroom. 18 So my question is, in -- within that 19 context, did Ms. White tell you whether or not she 20 performed a neurologic exam? 21 A. Unfortunately over a year out I do not 22 recall the specifics of that discussion. 23 Q. Did she say anything to you about whether 24 Mr. Green had indicated verbally that he was 25 paralyzed?</p>

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<p style="text-align: right;">Page 65</p> <p>1 A. Unfortunately, since it's been over a 2 year, I don't recall the specifics of that 3 discussion. I can tell you that we had talked about 4 the scenario and the fact that he had been in the 5 hospital. And I believe she had mentioned to me 6 that he'd had surgery, although at this point I 7 cannot say that with a hundred percent accuracy, and 8 that's about the most I remember from our 9 conversation.</p> <p>10 Q. Do you recall one way or the other whether 11 it was your impression that this was a suicide 12 attempt by Mr. Green?</p> <p>13 A. Do I remember if that was my impression at 14 the time or do I think that --</p> <p>15 Q. Correct.</p> <p>16 A. -- that's my impression now?</p> <p>17 Q. I'd like to know back at the time was it 18 your impression that that was a suicide attempt by 19 Mr. Green?</p> <p>20 A. I remember hearing that he had run himself 21 into a wall. I suppose I thought that was certainly 22 a possibility that he had been trying to commit 23 suicide. That's probably the most accurate 24 statement I could give you would be that I certainly 25 considered that a possibility.</p>	<p style="text-align: right;">Page 67</p> <p>1 That's what, you know, we do, we talk about cases, 2 what has happened.</p> <p>3 Certainly there are times that we'll 4 discuss differential diagnosis, what should we have 5 been thinking about, what are possibilities, and 6 sometimes we'll discuss what we could have done 7 differently.</p> <p>8 As to the specifics of that conversation 9 on that day, I would be speculating if I told you 10 that I remembered exactly what we talked about. As 11 a general rule, as I just mentioned, we'll talk 12 about the cases, what's going on, how they 13 presented, different things that we might want to 14 consider, different options that we have for a plan 15 of care.</p> <p>16 If it's in retrospect, we might also 17 discuss what we might have done differently. That 18 would be a pretty standard discussion that her and I 19 would have about cases, either bad outcomes or 20 difficult cases where we're not quite sure where to 21 go with somebody.</p> <p>22 Q. Did you know at the time you had the 23 discussion with her that Mr. Green was a 24 quadriplegic?</p> <p>25 A. I -- it's very fuzzy to me because</p>
<p style="text-align: right;">Page 66</p> <p>1 Q. And when you talked with Ms. White about 2 it in that first conversation, did she indicate to 3 you whether or not she suspected there was a closed 4 head injury as a result of running into the wall?</p> <p>5 A. I don't recall the specifics of that 6 conversation, sir. I wish I could give you more 7 specifics from it, but I would be speculating and 8 being untruthful if I did.</p> <p>9 Q. Do you recall whether you yourself thought 10 there was the possibility of a closed head injury 11 from the description Ms. White gave you?</p> <p>12 A. I don't recall.</p> <p>13 Q. Did you ask Ms. White whether she had 14 considered the possibility of a subdural hematoma?</p> <p>15 A. I don't remember what I asked her or did 16 not ask her during that conversation.</p> <p>17 Q. Do you recall whether you discussed with 18 her whether she had considered sending Mr. Green to 19 the hospital right away?</p> <p>20 A. I do remember that we had a conversation 21 to discuss the case, what had happened, how things 22 ended up turning out to what we knew at that point. 23 As to the specifics, I just -- I can't tell you 24 exactly what we did or didn't talk about. I mean, I 25 know that we talked about it. We reviewed it.</p>	<p style="text-align: right;">Page 68</p> <p>1 obviously I've heard that news since then, so 2 exactly at what point I learned that information 3 would -- I would be speculating as to when exactly 4 that was.</p> <p>5 Q. Did you learn it within a week?</p> <p>6 A. I think so.</p> <p>7 Q. Did you ever make any effort to get the 8 hospital records?</p> <p>9 A. Not that I recall.</p> <p>10 Q. Did you have the ability to look at his 11 hospital records?</p> <p>12 A. Yes.</p> <p>13 Q. How would you have done it if you wanted 14 to do it?</p> <p>15 A. We could contact the hospital and get 16 records faxed over. I also have access to the 17 electronic medical record at the hospital.</p> <p>18 Q. So I know you're saying that you don't 19 remember one way or the other. Let me ask you the 20 question this way. Is it your belief, based upon 21 the way you usually do your business, that you would 22 have looked at his hospital records at some time?</p> <p>23 A. Not necessarily.</p> <p>24 Q. Do you recall any other case while you've 25 been medical director at Corizon where an inmate</p>



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<p style="text-align: right;">Page 81</p> <p>1 either calling you or sending him to the hospital?</p> <p>2 A. Not necessarily.</p> <p>3 Q. Now, is it normally understood that</p> <p>4 charting will be done the day of an event?</p> <p>5 A. Ideally, yes.</p> <p>6 Q. And if someone puts a chart note in on a</p> <p>7 day other than the date of the chart note, are they</p> <p>8 supposed to say "late entry" or something like that</p> <p>9 to designate that the note was not made simultaneous</p> <p>10 with the event?</p> <p>11 A. I believe that would be the standard, yes.</p> <p>12 Q. All right. So looking at -- on the</p> <p>13 progress notes, there's a 2/12/13 note at 1730. Do</p> <p>14 you see that?</p> <p>15 A. Yes.</p> <p>16 Q. All right. And then Ms. White's next note</p> <p>17 is at 2/12/13 and it's not timed. Do you see that?</p> <p>18 A. Yes.</p> <p>19 Q. Is it your assumption, looking at the</p> <p>20 chart, that Ms. White wrote her chart note on</p> <p>21 February 12th?</p> <p>22 A. Yes.</p> <p>23 Q. Did you ask Ms. White whether she wrote it</p> <p>24 on February 12th?</p> <p>25 A. No.</p>	<p style="text-align: right;">Page 83</p> <p>1 A. That would be one of the things that would</p> <p>2 be on the list of possibilities. Absolutely.</p> <p>3 Q. All right. Well, at -- according to the</p> <p>4 other nurse -- and I believe it's Nurse Smith --</p> <p>5 this 1730 note, Mr. Green was saying, quote, I can't</p> <p>6 move, that she noticed there was no gross movement,</p> <p>7 no gross or fine movement visualized.</p> <p>8 And Nurse White said the same thing in her</p> <p>9 note, that he stated he couldn't move and that he</p> <p>10 was hypotensive and bradycardic. So under all of</p> <p>11 the circumstances, given that we know that he had</p> <p>12 run into a wall head first earlier in the day, is</p> <p>13 shock high on the differential at that point?</p> <p>14 A. That or something related to his head</p> <p>15 injury.</p> <p>16 Q. All right. Is it an emergency situation</p> <p>17 at that point?</p> <p>18 A. Yes.</p> <p>19 Q. Does he need to go to the hospital</p> <p>20 immediately?</p> <p>21 A. Yes.</p> <p>22 Q. Is his life in danger?</p> <p>23 A. Don't know.</p> <p>24 Q. Might his life be in danger at that point?</p> <p>25 A. It might be.</p>
<p style="text-align: right;">Page 82</p> <p>1 Q. Were you aware that Ms. White had checked</p> <p>2 out of the jail and had left her -- had left her --</p> <p>3 had left the jail and gone off duty at 4:00 p.m. on</p> <p>4 February 12th?</p> <p>5 A. I'm not aware of her time schedule, no.</p> <p>6 Q. Did she tell you that she had stayed at</p> <p>7 the jail until the ambulance came?</p> <p>8 A. I don't believe we talked about that.</p> <p>9 Q. You will notice on the February 12th note</p> <p>10 by Nurse -- by the other nurse -- that there's a</p> <p>11 blood pressure of 84 over 62 and a pulse -- and a</p> <p>12 pulse of 42. Do you see that?</p> <p>13 A. Yes.</p> <p>14 Q. All right. That's -- and then did you</p> <p>15 notice on Ms. White's chart note from earlier in the</p> <p>16 day, on the first page, the blood pressure was 128</p> <p>17 over 84 with a pulse of 72?</p> <p>18 A. You're asking me did I notice that</p> <p>19 previously or do I notice it right now?</p> <p>20 Q. Right now.</p> <p>21 A. Yes, I notice that.</p> <p>22 Q. Okay. So would you agree with me that</p> <p>23 this -- given the condition that he was in when this</p> <p>24 1730 note was written that he was probably in some</p> <p>25 kind of shock?</p>	<p style="text-align: right;">Page 84</p> <p>1 Q. He could be in spinal shock. Is that</p> <p>2 correct?</p> <p>3 A. That's a possibility.</p> <p>4 Q. He could stop breathing. Is that correct?</p> <p>5 A. I don't -- I wouldn't jump -- think he</p> <p>6 would stop breathing.</p> <p>7 Q. His blood pressure was so low and his</p> <p>8 pulse was so high, was there a risk that he could go</p> <p>9 into cardiac arrest?</p> <p>10 A. His pulse was low.</p> <p>11 Q. Excuse me. His pulse was low. His -- his</p> <p>12 -- his --</p> <p>13 A. Blood pressure was low.</p> <p>14 Q. His blood pressure was low. So was he in</p> <p>15 -- at risk of going into cardiac arrest?</p> <p>16 A. It would be possible.</p> <p>17 Q. Was he at risk of suffering an anoxic</p> <p>18 brain injury?</p> <p>19 A. He could be.</p> <p>20 Q. Would you have expected Ms. White to call</p> <p>21 you immediately?</p> <p>22 A. I probably would expect her to arrange for</p> <p>23 transport before she called me, so not immediately.</p> <p>24 Q. Would the transport be an emergency</p> <p>25 transport?</p>

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<p style="text-align: right;">Page 85</p> <p>1 A. Probably.</p> <p>2 Q. Lights and sirens?</p> <p>3 A. If that's what you mean by emergency</p> <p>4 transport --</p> <p>5 Q. Yes.</p> <p>6 A. -- then the answer is also yes.</p> <p>7 Q. Would you expect Ms. White to stay with</p> <p>8 her patient until the ambulance arrived?</p> <p>9 A. I would expect -- I would hope somebody</p> <p>10 would stay with the patient, one of our staff.</p> <p>11 Q. Would you expect Ms. White to go home</p> <p>12 before the ambulance arrived?</p> <p>13 A. Would I expect her to? I would not expect</p> <p>14 her to.</p> <p>15 Q. Yes. Would you expect her to stay in the</p> <p>16 jail with her patient until the ambulance arrived?</p> <p>17 A. Probably.</p> <p>18 Q. If she had called you, was there any</p> <p>19 medical care that she -- that you could have</p> <p>20 recommended for her to give to support his blood</p> <p>21 pressure or his pulse?</p> <p>22 A. Yes.</p> <p>23 Q. What would that have been?</p> <p>24 A. Start an IV. That would probably be the</p> <p>25 first thing. Get some fluids going.</p>	<p style="text-align: right;">Page 87</p> <p>1 A. My attorney has instructed me not to</p> <p>2 answer that question.</p> <p>3 <b>BY MR. ROSENTHAL:</b></p> <p>4 Q. Yeah. Let me help you here a little bit.</p> <p>5 I'm going to hand you what is marked as Exhibit 102.</p> <p>6 It's the sentinel event form that was sent to</p> <p>7 Corizon. Have you ever seen that document before?</p> <p>8 A. I don't recall.</p> <p>9 Q. You will notice that it was sent on or</p> <p>10 about April 12th. Do you see that?</p> <p>11 A. Yes.</p> <p>12 Q. Did you have anything to do with causing</p> <p>13 that document to be sent?</p> <p>14 A. Did I have anything to do with causing it</p> <p>15 to be sent? Please clarify the question.</p> <p>16 Q. Well, what is your understanding as to how</p> <p>17 soon after an event the sentinel event form should</p> <p>18 be sent to corporate headquarters?</p> <p>19 <b>MR. COLEMAN:</b> Generally?</p> <p>20 <b>MR. ROSENTHAL:</b> Yeah, generally.</p> <p>21 <b>BY MR. ROSENTHAL:</b></p> <p>22 Q. Is it supposed to be sent within a day or</p> <p>23 two, or can it wait a month or two months?</p> <p>24 A. Generally it should be sooner than later.</p> <p>25 Q. All right. So within a few days.</p>
<p style="text-align: right;">Page 86</p> <p>1 Q. So if she had called you, that's one of</p> <p>2 the things you probably would have recommended?</p> <p>3 A. I would think so. I mean, I'm</p> <p>4 speculating, but that's something that comes to</p> <p>5 mind, yes, sir.</p> <p>6 Q. Then were there any medications available</p> <p>7 in the pharmacy that could have been administered to</p> <p>8 assist his blood pressure and pulse?</p> <p>9 A. You know, I would -- Epinephrine, but I</p> <p>10 wouldn't probably give it -- if somebody was still,</p> <p>11 you know, having a pulse and a heart rate and</p> <p>12 breathing, I probably wouldn't give them Epinephrine</p> <p>13 right away. If it deteriorated further to where he</p> <p>14 was in true cardiac arrest then I would give</p> <p>15 Epinephrine.</p> <p>16 Q. Did you learn at any time that the</p> <p>17 ambulance was not called until 4:30 even though</p> <p>18 Ms. White examined the patient sometime shortly</p> <p>19 before 4:00 p.m.?</p> <p>20 <b>MR. COLEMAN:</b> You know, I'm going to</p> <p>21 give the same instruction. If he learned it other</p> <p>22 than in the process related to a sentinel event</p> <p>23 report, you can answer the question, and other than,</p> <p>24 obviously, a discussion with your attorneys.</p> <p>25 <b>MR. ROSENTHAL:</b> Let me --</p>	<p style="text-align: right;">Page 88</p> <p>1 Correct?</p> <p>2 A. I think once the appropriate information</p> <p>3 is available.</p> <p>4 Q. And who usually is responsible to send the</p> <p>5 form? You, as the medical director, or the HSA?</p> <p>6 A. Either one.</p> <p>7 Q. All right. So did you make any effort to</p> <p>8 send a sentinel event form in February of 2013?</p> <p>9 A. I don't recall the specific date.</p> <p>10 Q. Can you tell me why it took two months</p> <p>11 before a sentinel event form went in?</p> <p>12 A. I don't know.</p> <p>13 Q. Did the investigation that you did --</p> <p>14 which I'm not allowed to ask you about what you did,</p> <p>15 but I'm just asking you a timing question now -- did</p> <p>16 the investigation that you did related to the</p> <p>17 sentinel event occur before or after that form went</p> <p>18 in?</p> <p>19 A. I don't recall the specific date.</p> <p>20 Certainly I talked with somebody the day after or</p> <p>21 that night. I don't recall when it was.</p> <p>22 Q. Somebody in Tennessee you mean?</p> <p>23 A. No. The provider, Kris White.</p> <p>24 Q. Right. But the form didn't go in for two</p> <p>25 months. At least that's the only form we found.</p>

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<p style="text-align: right;">Page 89</p> <p>1 Okay?</p> <p>2 A. Okay.</p> <p>3 Q. So assuming that that's the only sentinel</p> <p>4 even form that went in, I'm wondering if you can</p> <p>5 tell me whether you did your investigation before or</p> <p>6 after that form went in?</p> <p>7 A. I would say my investigation started with</p> <p>8 the discussion with Kris White after I was made</p> <p>9 aware of the case and proceeded from there.</p> <p>10 Q. Did you ever look at the videotapes that</p> <p>11 were taken in the jail cell?</p> <p>12 A. No, sir.</p> <p>13 Q. And just so that -- so that we're clear</p> <p>14 about this, you do not remember one way or the other</p> <p>15 whether you learned that the ambulance was called at</p> <p>16 4:30 prior to responding to a sentinel event</p> <p>17 investigation request. Am I understanding you</p> <p>18 correctly?</p> <p>19 A. I knew prior to looking at the specific</p> <p>20 details that there had been a delay. I didn't have</p> <p>21 any specifics as to the exact times.</p> <p>22 Q. Did you make any effort to find out the</p> <p>23 exact times?</p> <p>24 A. Subsequently.</p> <p>25 Q. When?</p>	<p style="text-align: right;">Page 91</p> <p>1 time stamps, exact times came up during a later</p> <p>2 process which my attorney has recommended I don't</p> <p>3 discuss.</p> <p>4 But in the entirety of the situation,</p> <p>5 certainly it was noted to be part of the</p> <p>6 circumstances.</p> <p>7 Q. Did you believe Ms. White had violated the</p> <p>8 physician assistant's standard of care by not</p> <p>9 getting an ambulance there sooner on February 12th?</p> <p>10 A. No.</p> <p>11 Q. Did you ever interview -- did you -- let</p> <p>12 me start that again.</p> <p>13 We've taken the deposition of a Nurse</p> <p>14 Fagan. She told us that she wrote a chart note and</p> <p>15 it's not in the chart. Were you aware of that?</p> <p>16 A. What's Nurse Fagan's first name?</p> <p>17 Q. Sharon.</p> <p>18 A. Sharon? I'm not aware of that.</p> <p>19 Q. Were you aware prior to today that</p> <p>20 Ms. White had left the jail before 4:00 p.m.?</p> <p>21 A. No.</p> <p>22 Q. Does any paperwork go with a prisoner to</p> <p>23 the hospital when there's an emergency transport?</p> <p>24 A. There's a form that I believe gets sent</p> <p>25 with them, yes.</p>
<p style="text-align: right;">Page 90</p> <p>1 MR. COLEMAN: Again, if it's -- you</p> <p>2 can answer if it's other than in the process of the</p> <p>3 sentinel event report.</p> <p>4 A. My attorney has recommended I don't answer</p> <p>5 that.</p> <p>6 BY MR. ROSENTHAL:</p> <p>7 Q. I want to be sure that I understand your</p> <p>8 role as supervising Ms. White. In your role of</p> <p>9 supervising Ms. White, did you feel it was your</p> <p>10 responsibility to determine what had happened on</p> <p>11 February 12th?</p> <p>12 A. Yes.</p> <p>13 Q. Aside and apart from any corporate</p> <p>14 sentinel event investigation. Correct?</p> <p>15 A. Yeah.</p> <p>16 Q. All right. So in supervising Ms. White</p> <p>17 and in doing an investigation to determine what had</p> <p>18 happened, when did you learn that the ambulance</p> <p>19 wasn't called until 4:30?</p> <p>20 A. As part of supervising Ms. White, my</p> <p>21 primary concern was discussed with her, the</p> <p>22 situation, the clinical situation, the course of</p> <p>23 events. Other than in a specific issue, which my</p> <p>24 attorney has recommended that I not answer, time --</p> <p>25 you know, a delay is an issue. Looking at specific</p>	<p style="text-align: right;">Page 92</p> <p>1 Q. I'm going to hand you what we previously</p> <p>2 marked as Exhibit 57. That's a form that we</p> <p>3 received from Corizon in discovery prepared by</p> <p>4 Ms. White. Have you seen that form before?</p> <p>5 MR. COLEMAN: The document or the</p> <p>6 form?</p> <p>7 MR. ROSENTHAL: The document. Excuse</p> <p>8 me.</p> <p>9 A. I believe so, but I don't recall</p> <p>10 specifically.</p> <p>11 BY MR. ROSENTHAL:</p> <p>12 Q. Did you talk about it with Ms. White, that</p> <p>13 -- when she had filled that form out, did you talk</p> <p>14 to her about it?</p> <p>15 A. About the form?</p> <p>16 Q. About filling out the form, the document</p> <p>17 that we're looking at.</p> <p>18 A. I did not specifically talk to her about</p> <p>19 form filling out.</p> <p>20 Q. Well, were you of the impression that she</p> <p>21 filled that document out and it went with Mr. Green</p> <p>22 to the hospital?</p> <p>23 A. I don't recall.</p> <p>24 Q. Are you familiar with the form, that it's</p> <p>25 two different pieces of paper, I think, with</p>

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1 **MR. ROSENTHAL:** Sheriff's Officer  
2 Burnett.  
3 **MR. COLEMAN:** Sheriff's Officer  
4 Burnett. I apologize. Does that make sense to you?  
5 **A.** I don't understand the question because as  
6 part of my review of this, it was for the sentinel  
7 event report. So I guess it goes back to what my  
8 first question and response to your question is, did  
9 I do an investigation and a separate investigation  
10 completely separate from that?  
11 **BY MR. ROSENTHAL:**  
12 **Q.** Hang on. Let me try to separate this out  
13 and make this simpler.  
14 **A.** Thank you.  
15 **Q.** You agree with me that you have the duty  
16 to supervise Ms. White?  
17 **A.** Yes.  
18 **Q.** As part of that duty to supervise  
19 Ms. White, did you investigate the circumstances of  
20 February 12th?  
21 **MR. COLEMAN:** That's not going to  
22 help.  
23 **MR. ROSENTHAL:** It is going to help.  
24 **BY MR. ROSENTHAL:**  
25 **Q.** I want to know whether supervising

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1 Ms. White, prior to this sentinel event going out  
2 two months later, did you make an effort to  
3 investigate the circumstances?  
4 **A.** The sentinel event form subsequently led  
5 to the sentinel event report, which is something  
6 I've been advised by my attorney not to discuss.  
7 **Q.** All right. And I want to know whether  
8 prior -- this sentinel event form went out on April  
9 12th.  
10 **A.** Yes, sir.  
11 **Q.** Do you agree with me that the sentinel  
12 event form that you did in response to this sentinel  
13 event report occurred after April 12th?  
14 **MR. COLEMAN:** I'm going to object to  
15 the form of the question. I'm going to just  
16 instruct you not to answer that. I think it's too  
17 vague.  
18 **MR. ROSENTHAL:** It's not too vague.  
19 **BY MR. ROSENTHAL:**  
20 **Q.** I want to know whether the investigation  
21 you did occurred after the sentinel event form went  
22 in.  
23 **MR. COLEMAN:** My objection is asked  
24 and answered and I'm going to instruct you not to  
25 answer it again.

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1 **MR. ROSENTHAL:** Well, I apologize,  
2 Mr. Coleman, if I can't remember his answer to that  
3 question. Perhaps you would remind me of his  
4 answer.  
5 **MR. COLEMAN:** His answer was that he  
6 didn't know. He didn't know when in respect to the  
7 form going out on April 12th the sentinel event  
8 report was -- or investigation occurred. He's  
9 testified, I think, for an extensive period of time  
10 that he had a discussion with Ms. White in the  
11 evening and/or the day after -- in the evening of  
12 the events or -- and/or the day after -- and he's  
13 not sure which -- and so I think that what's  
14 happening here, Mr. Rosenthal, is that you're --  
15 when you say investigation, you're confusing the  
16 witness and asking him to answer questions that he's  
17 answered many times.  
18 **BY MR. ROSENTHAL:**  
19 **Q.** Did you at any point in time prior to  
20 today from an opinion as to when Mr. Green suffered  
21 his spinal cord injury?  
22 **A.** Yes.  
23 **Q.** And what is your opinion?  
24 **A.** When he ran his head into the wall.  
25 **Q.** Did you at any point in time prior to

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1 today form an opinion as to whether Ms. White  
2 performed a proper neurologic exam in the courtroom?  
3 **A.** Yes.  
4 **Q.** What is your opinion?  
5 **MR. COLEMAN:** You know, I'm going to  
6 instruct you not to answer if you formed the opinion  
7 based on your sentinel event report process.  
8 If you formed the opinion in some  
9 other fashion, based on either review of the chart  
10 or discussion with Kris White, you can answer the  
11 question if you have the ability based on that  
12 information.  
13 **A.** Based on what I see in the chart, I think  
14 she did a complete neurologic exam as would be  
15 expected under those circumstances.  
16 **BY MR. ROSENTHAL:**  
17 **Q.** Did you at any point in time prior to  
18 today form an opinion as to whether you should have  
19 been called by Ms. White before he was moved from  
20 the courtroom?  
21 **MR. COLEMAN:** Asked and answered.  
22 I'll let you answer that one again.  
23 **A.** Did I form an opinion prior to today?  
24 **BY MR. ROSENTHAL:**  
25 **Q.** Yes.

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1 A. Yes, I did.  
 2 Q. And what is your opinion?  
 3 A. No, I don't believe she needed to have  
 4 called me.  
 5 Q. Did you at any point in time prior to  
 6 today form an opinion as to whether the use of a  
 7 cervical collar and a backboard would have minimized  
 8 the injuries suffered by Mr. Green?  
 9 A. I would be speculating.  
 10 Q. Well, did you form an opinion on that  
 11 matter?  
 12 A. I would say I've considered it. I don't  
 13 know that I've formed an opinion on it.  
 14 Q. And in your consideration, what conclusion  
 15 have you reached, if any?  
 16 A. It's hard to, again, differentiate  
 17 because, of course, hindsight is 20/20. At the  
 18 time, based on the information I see here and what  
 19 I've looked at, there's no sign of neurologic injury  
 20 at this time so it would be hard to know, based on  
 21 the information I have, why somebody would put a  
 22 cervical collar on him.  
 23 Of course, hindsight is 20/20. I mean, we  
 24 know what happened down the road. This person is,  
 25 you know, moving their arms and legs, palpated the

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1 spine. Apparently no pain with that. No sign of a  
 2 neurologic problem other than, you know, some  
 3 subjective complaints, but the same person is saying  
 4 they are paralyzed and yet moving and also  
 5 complaining that their ears are paralyzed, which is  
 6 an extremely strange thing to say.  
 7 So, you know, hindsight is 20/20. It's  
 8 hard for me to separate out what I know to be the  
 9 final result of this situation, and so for that  
 10 reason, yeah, when we know what eventually happened,  
 11 it's clear.  
 12 When I look back at what the apparent  
 13 presentation was at the time, I think I would be  
 14 hard justified to say absolutely you needed to put a  
 15 cervical collar on that person.  
 16 Q. Would it have been good medical practice  
 17 to do that?  
 18 A. I'm not seeing anything based on how  
 19 things presented at that time that tells me so. Of  
 20 course, hindsight tells me so. I would have been  
 21 concerned about, you know, a closed head injury so I  
 22 would want the person monitored. Clearly you have  
 23 to take care of the bleeding.  
 24 Q. Let me --  
 25 A. But if somebody is moving and saying, "I'm

1 paralyzed," that makes no sense to me. And if they  
 2 are not having any neck problems and their  
 3 neurologic exam is normal, there's no reason for me  
 4 to think that that would have been the right thing  
 5 to do, of course.  
 6 Q. Let me interrupt you.  
 7 A. Hindsight is 20/20.  
 8 Q. Right. Let me interrupt you. Were you  
 9 aware that when Mr. Green was in the clinic having  
 10 his head sutured that he defecated on himself?  
 11 **MR. COLEMAN:** At what time?  
 12 A. I know there was some defecation. I don't  
 13 know the specifics of that.  
 14 **BY MR. ROSENTHAL:**  
 15 Q. Would you agree with me that a spinal cord  
 16 injury -- a severe spinal cord injury can cause a  
 17 person to lose bowel control?  
 18 A. That would be one of the things, although,  
 19 we see extensive defecation without spinal cord  
 20 injuries at that facility so . . .  
 21 Q. Would you have expected, Ms. White, when  
 22 she was suturing up Mr. Green's head, to have become  
 23 concerned about a spinal cord injury when he  
 24 defecated during that process?  
 25 A. I would need to know what the rest of his

1 neurologic exam was at that time or his neurologic  
 2 findings were. Unfortunately, sir, feces -- the  
 3 presence of feces is not uncommon in that facility.  
 4 So, certainly, if the other things were pointing in  
 5 a certain direction neurologically, that would be a  
 6 consideration.  
 7 If other things were pointing into a  
 8 psychiatric direction, that can be a consideration  
 9 as well.  
 10 If something was pointing toward a  
 11 gastrointestinal problem, that would be a  
 12 consideration.  
 13 Q. Did you, at any point in time prior to  
 14 today, form an opinion as to whether Mr. Green  
 15 should have had his vital signs checked on a regular  
 16 basis during the afternoon when he was in his jail  
 17 cell?  
 18 **MR. COLEMAN:** You know, I'm going to  
 19 instruct the witness not to answer that question.  
 20 I've given you a lot of latitude to ask opinion  
 21 questions. He's here as a fact witness. He's not  
 22 going to provide opinion testimony generally, so I'm  
 23 just going to instruct him not to answer that  
 24 question.  
 25 **MR. ROSENTHAL:** I'm going to take all



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October 07, 2014

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UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON  
EUGENE DIVISION

KELLY CONRAD GREEN II, an )  
individual, by and through his )  
guardian ad litem Derek )  
Johnson, )  
Plaintiff, )  
v. ) No.6:13CV01855-TC  
CORIZON HEALTH, INC., a ) Volume 2  
Tennessee Corporation; et al., ) Pages 108-225  
Defendants. )

DEPOSITION OF JUSTIN MONTOYA, MD  
October 7th, 2014  
Tuesday  
1:11 P.M.

THE VIDEOTAPED DEPOSITION OF JUSTIN  
MONTOYA, MD, was resumed at CC Reporting &  
Videoconferencing, 172 East 8th Avenue, Eugene,  
Oregon, before Deborah M. Bonds, CSR-RPR, Certified  
Shorthand Reporter in and for the State of Oregon.

(continued)

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1 Q. -- that -- is that what you believe these  
2 to be also?  
3 A. Yes.  
4 Q. Okay.  
5 A. Well, when it has the date and that on the  
6 top of it, I would assume that's what that is.  
7 Q. And do you keep these various meeting  
8 notes in a notebook or in a pad of -- on a pad of  
9 some sort?  
10 A. They were kept in a pad.  
11 Q. Okay. And is the actual pad still in  
12 existence?  
13 A. No. I gave him the papers.  
14 Q. Okay. Did you give the pad to him or did  
15 you give him photocopies like he gave me?  
16 A. Well, there was things that were not  
17 relevant to this on that pad so I just gave him the  
18 relevant stuff that you asked for.  
19 Q. So you tore piece -- you tore off your pad  
20 these pages and gave them to the lawyer?  
21 A. Well, I had things on there that were not  
22 relevant to this at all.  
23 Q. That's fine. I understand. I just want  
24 to understand what you gave to Mr. Coleman. Was it  
25 sheets of paper?

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1 **THE WITNESS:** Did I give you sheets of  
2 paper or a pad?  
3 **MR. COLEMAN:** Let's go off the  
4 record --  
5 A. I think I gave him sheets of paper.  
6 **MR. COLEMAN:** Let's go off the record  
7 for a second.  
8 **THE VIDEOGRAPHER:** Off the record.  
9 Hold on one moment.  
10 (Brief discussion off the record.)  
11 **THE VIDEOGRAPHER:** We're back on the  
12 record.  
13 **BY MR. ROSENTHAL:**  
14 Q. Okay. So we had a discussion off the  
15 record. And am I correct, Dr. Montoya, that your  
16 best recollection is that these were piece -- these  
17 notes were taken on some kind of a pad. And when I  
18 requested certain records, that one way or the other  
19 these sheets were separated from that pad?  
20 A. I swear under oath I gave you every piece  
21 of paper --  
22 Q. I'm not --  
23 A. -- that was relevant to it, and I  
24 maintained things that were not relevant to it.  
25 Q. Okay. Here's my question. The pad, did

1 you use it for various aspects of your life and not  
2 just Corizon stuff?  
3 A. For business, yes.  
4 Q. For business that had nothing to do with  
5 Corizon?  
6 A. Yes.  
7 Q. Okay. All right. So going back to this  
8 page we were looking at, 3282, it says 7/9/13 MAC,  
9 and then it lists who was present, Kris and Kevin  
10 and Linda. Who is Linda?  
11 A. Linda -- I can't remember her last name.  
12 She's the administrative person.  
13 **MR. COLEMAN:** You're thinking of  
14 Panzer, Linda Panzer (phonetic)?  
15 A. Linda Panzer.  
16 **BY MR. ROSENTHAL:**  
17 Q. Administrative person for whom?  
18 A. For Corizon.  
19 Q. Okay.  
20 A. Secretary.  
21 Q. Okay. And then it says Lieutenant Brown.  
22 All right. So then Item No. 1, what is that word?  
23 A. Movement.  
24 Q. So what does that refer to, do you know?  
25 A. Shall I speculate?

1 Q. Please.  
2 **MR. COLEMAN:** Not if it's -- if you're  
3 just guessing, no; if you have some reason to  
4 believe you know what it is, go ahead.  
5 A. I believe it means movement of people  
6 throughout the jail.  
7 **BY MR. ROSENTHAL:**  
8 Q. This is the physical movement of nurses  
9 and corrections officers and patients?  
10 A. I don't recall if it meant corrections  
11 people or nurses or inmates, slash, patients.  
12 Q. Well, I'm wondering, why was movement of  
13 persons in the jail an issue? Can you recall?  
14 A. I believe -- going back to the third page,  
15 was it -- it had to do with when they were able to  
16 move people around the jail for patients -- for me  
17 to see.  
18 Q. Okay. And the second item, what does that  
19 say?  
20 A. "Book-in."  
21 Q. Could you read the rest of it, please?  
22 A. (Reading): Something states it can  
23 take hours for medical to clear.  
24 Q. All right. Can you tell me what that --  
25 what those words are referring to?

<p style="text-align: right;">Page 132</p> <p>1 A. That it can take the medical a while to 2 get up there to book-in. 3 Q. So what does that mean, get up there to 4 book-in? 5 A. To go from the medical area to the book-in 6 area. 7 Q. So why would medical people go to the 8 book-in area? 9 A. Why would they? 10 Q. Yeah. Why is this an issue? 11 A. To check people who are coming in. 12 Q. What was the -- what was the standard 13 procedure at that time as to when somebody on the 14 Corizon nursing staff would go up to book-in to 15 check people who were being brought into the jail? 16 A. I'd have to look at the procedure book to 17 give you an exact standard, but they would go see 18 people who were being booked in to do a medical 19 evaluation. 20 Q. At the time they were brought into the 21 jail? 22 A. I think we went over this before, but it 23 is when they are being -- not when they come into 24 the jail, but when they are being housed, I think, 25 is when the first main evaluation goes through. Is</p>	<p style="text-align: right;">Page 134</p> <p>1 this was a valid complaint that was being made? 2 A. I don't recall how I felt about it. 3 Q. Was anything done to change the system so 4 that it wouldn't take hours? 5 A. Well, I don't think it actually took 6 hours. I think that was the term that somebody put 7 in there, which is why I put it in quotes, because 8 that was their word, I believe, that they had 9 mentioned, which I think was the -- was their word 10 that they used. I don't think it takes hours. 11 Q. Well, was there a staffing shortage? 12 Was -- was that the question that was being 13 discussed, whether or not Corizon had sufficient 14 staff to get the book-in medicals done? 15 A. I don't recall the staff being an issue, 16 if I recall correctly, as far as, you know, staffing 17 numbers and that type of thing. Again, this has 18 been, you know, 15 months ago. I have a lot of 19 discussions. I have a lot of meetings. You know, 20 asking me to recall exactly what, you know, 21 inferences is a little difficult for me. I 22 apologize. 23 Q. Well, all I'm trying to understand is why 24 it was of significant enough importance that it was 25 discussed at this monthly meeting and that you made</p>
<p style="text-align: right;">Page 133</p> <p>1 that the correct terminology? I think so. 2 Q. So the comment here that "it can take 3 hours for medical" -- does it say "to clear"? Is 4 that what it says? 5 A. I believe so, yeah. 6 Q. So does that mean that there was an issue 7 with how long it was taking to get a medical 8 evaluation so that somebody could be put in housing? 9 A. According to somebody. I can't read that 10 -- oh, email. Email states that. 11 Q. So the first word there, you think, is 12 email? 13 A. I believe it is, yes, sir. 14 Q. So what's that -- who sent the email? 15 A. I don't have the email. 16 Q. So do you know why this matter was being 17 discussed? 18 A. Yes. 19 Q. Could you explain that to me, please? 20 A. Because there was an email sent stating 21 that it took hours for medical people to clear them. 22 Q. Well, was the email -- did it come from 23 somebody at Lane County? 24 A. I don't know who sent it. 25 Q. Did -- was it true that -- did you feel</p>	<p style="text-align: right;">Page 135</p> <p>1 a note about it? 2 A. If you'd asked me in August 2013, I'm sure 3 I could have told you. 4 Q. All right. So then it says underneath 5 Plan of Action (reading): May break -- no. Excuse 6 me -- May be able to move -- is that the next word? 7 A. Yes, I believe so. 8 Q. -- (reading): 15 minutes early or later 9 -- well, that doesn't sound right. 10 Can you read that line to me? I'm having 11 trouble reading -- 12 A. (Reading): May be able to move 15 13 minutes early or later, or earlier. 14 Q. So what does that refer to? 15 A. That refers to what I think I mentioned on 16 page 3 about them moving the inmates around when I'm 17 there for lunches -- 18 Q. Okay. 19 A. -- that they may be able to either move 20 them 15 minutes earlier or 15 minutes later or maybe 21 that I would try to come in earlier so that I didn't 22 overlap with as much as a nonmovement time. 23 Q. All right. Then the next page, 3283, 24 August 13 MAC meeting. The first question I have -- 25 where it says (reading): RN, Paula Sawyer,</p>

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1 terminated.

2 Do you see that?

3 A. I think it says Paula Savage.

4 Q. Okay. Excuse me.

5 A. If I -- I think that's her name.

6 Q. All right. And do you recall why this

7 nurse was terminated?

8 A. I think when I have a P with a circle

9 around it, that means pending.

10 Q. Okay. Do you know -- was she terminated?

11 A. You know, I get their names mixed up so

12 bad, it's embarrassing. I don't think she works

13 there anymore.

14 Q. And do you know why her termination was

15 pending at this time? By this time, I mean, in

16 August of 2013.

17 A. I don't recall.

18 Q. And then two lines --

19 A. I get them all mixed up.

20 Q. And then two lines from the bottom it says

21 (reading): Kris, use of time, not

22 organizing charts.

23 Could you explain that to me, please?

24 A. I think she -- well, I don't know. I

25 could --

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1 Q. Can you tell me --

2 A. I could guess.

3 Q. Well, I'd like you to tell me your best

4 recollection of what it means.

5 A. I don't actually have a recollection. I

6 mean, I might be able to make an inference off of

7 what my notes are, but that would be --

8 Q. Please, would you --

9 A. -- a stab in the dark, at best.

10 Q. Well, would you make the inference,

11 please?

12 A. That she was spending some time doing

13 nonmedical things, trying to, you know, help out,

14 and clean up the charts so that they were more

15 organized, but I think we wanted her to make sure

16 and focus on spending more times with direct patient

17 care and allow the other staff to do the -- you

18 know, the things that -- so she could do only the

19 things that she could do and then let the less

20 qualified staff, I think, do the more office

21 administrative stuff.

22 Q. Okay.

23 A. Pretty sure, but I'm not sure.

24 Q. Okay. You skipped three pages now to the

25 one on the bottom that says Corizon 3286.

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1 A. Let me just look at this one other one

2 here so I can get the context here.

3 Q. So I'm interested -- there's some boxes in

4 the bottom half of the page, and I'm interested in

5 this lower right-hand box. Could you read what's in

6 that box, please?

7 A. It says -- I think it says -- I think it's

8 supposed to say (reading): Haldol, 5, slash, 2, and

9 then something document. I'm not sure what that

10 other word is at this point.

11 Q. Do you have any recollection as to what

12 that note's about?

13 A. 5 milligrams of Haldol and 2 milligrams of

14 Ativan.

15 Q. Okay. Do you have any recollection --

16 A. That doesn't look like Ativan, but I think

17 that's what that references.

18 Q. So can you tell me what this is all about,

19 this note?

20 A. This note in particular, no. I can tell

21 you that sometimes when people are psychotic they

22 receive a combination of Haldol, 5 milligrams, and

23 2 milligrams of Ativan, often prescribed by the

24 psychiatrist to help get their psychosis under

25 control.

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1 Q. Okay. And then the next page, Corizon

2 3287, that's the 11/12/13 MAC meeting. And I'm

3 interested in the line that's the third kind of

4 entry. It says (reading): Need 24/7 book-in nurse.

5 See that?

6 A. Uh-huh.

7 Q. What does that refer to?

8 A. That a book-in nurse is needed 24 hours a

9 day, 7 days a week.

10 Q. Is this the first time this issue came up,

11 to your recollection?

12 A. I don't recall.

13 Q. Was someone complaining about the lack of

14 having a 24/7 book-in nurse?

15 A. I could just tell you what's on the page,

16 sir. I don't recall.

17 Q. You don't have any recollection?

18 A. We must have been talking about it because

19 I put it in the notes.

20 Q. But you don't have any recollection what

21 the conversation was?

22 A. That we needed to have a 24-hour-a-day --

23 24-hours-a-day, 7-days-a-week book-in nurse.

24 Q. But you don't know whether this is an

25 issue that had been hanging around for a while or

<p style="text-align: right;">Page 140</p> <p>1 whether this was a brand-new issue?</p> <p>2 A. Well, we did talk about the nurse in</p> <p>3 book-in regarding the email previously, so it was</p> <p>4 mentioned there.</p> <p>5 Q. Right.</p> <p>6 A. Or some reference to it, in general. I</p> <p>7 don't know if it was exactly 24/7, but there was</p> <p>8 some reference on the previous page that was --</p> <p>9 Q. Right. I remember.</p> <p>10 A. -- whatever it was.</p> <p>11 Q. But you told me that wasn't a staffing</p> <p>12 issue, so I'm wondering is it a staffing issue on</p> <p>13 this note?</p> <p>14 A. I don't recall telling you whether it was</p> <p>15 or was not a staffing issue.</p> <p>16 Q. Okay. Let me just ask you. Was it a</p> <p>17 staffing issue -- on November 12, 2013, was somebody</p> <p>18 complaining that Corizon didn't have enough staff to</p> <p>19 do 24/7 coverage of book-in?</p> <p>20 A. I don't know if somebody was complaining</p> <p>21 or if it was a change in the policy that we were</p> <p>22 going toward.</p> <p>23 Q. Well --</p> <p>24 A. Certainly it got brought up at that</p> <p>25 meeting.</p>	<p style="text-align: right;">Page 142</p> <p>1 "Contract not renewed." Oh, Sherlin. The second</p> <p>2 line says -- I think it says "Sherlin contract not</p> <p>3 renewed."</p> <p>4 Q. What -- what or who is Sherlin?</p> <p>5 A. Sherlin was the nurse practitioner</p> <p>6 previously.</p> <p>7 Q. Do you know why her contract was not</p> <p>8 renewed?</p> <p>9 A. I don't think she was needed anymore. And</p> <p>10 then the other one, Daniels -- that just doesn't</p> <p>11 look like an N -- or my N, but it -- that's</p> <p>12 embarrassing. I know I have bad handwriting, but I</p> <p>13 can usually read it.</p> <p>14 Q. All right. Then on the next page, right</p> <p>15 at the bottom, is that your Corizon email address,</p> <p>16 Justin.montoya@Corizon?</p> <p>17 A. Yes.</p> <p>18 Q. And then what goes after Corizon on the</p> <p>19 email address line? Is it com or org or --</p> <p>20 A. I think it's com. I think it's a -- it</p> <p>21 might be CorizonHealth.com.</p> <p>22 Q. All right. Do you still have that same</p> <p>23 email address with Corizon?</p> <p>24 A. Yes.</p> <p>25 Q. And do you use that for Corizon business?</p>
<p style="text-align: right;">Page 141</p> <p>1 Q. Well, was a 24/7 book-in nurse provided</p> <p>2 after this meeting?</p> <p>3 A. I don't know.</p> <p>4 Q. Is there a 24/7 book-in nurse now?</p> <p>5 A. I'd have to check the staffing algorithm.</p> <p>6 Q. All right. Then the next page, Corizon</p> <p>7 3288, it says "Corizon email." And I was just</p> <p>8 wondering, was there some new email system put into</p> <p>9 place at that time or is it --</p> <p>10 A. No.</p> <p>11 Q. What does that refer to?</p> <p>12 A. I think I was having problems with the</p> <p>13 password or something on my Corizon email or my log</p> <p>14 in or something like that.</p> <p>15 Q. All right. Then the next page, Corizon</p> <p>16 3289, the third item here, could you read that to</p> <p>17 me, please?</p> <p>18 A. Boy, this is embarrassing.</p> <p>19 Q. When I looked at it, I thought it said CNA</p> <p>20 Daniels released. Does that make -- would that make</p> <p>21 sense?</p> <p>22 A. I don't know of any CNA Daniels.</p> <p>23 Q. Okay. Do you remember any employee with</p> <p>24 the name of Daniels?</p> <p>25 A. Something -- what's that next part say?</p>	<p style="text-align: right;">Page 143</p> <p>1 A. Sometimes.</p> <p>2 Q. Then the last page, right here it says</p> <p>3 "New" -- I think it says "contract" about a third of</p> <p>4 the way up. Do you see that?</p> <p>5 A. Uh-huh.</p> <p>6 Q. What does it say right below there?</p> <p>7 A. (Reading): CCC immediate response only.</p> <p>8 BOP physicals.</p> <p>9 Q. Can you explain those two lines to me?</p> <p>10 A. The CCC stands for -- what does that stand</p> <p>11 for? It's like the -- I think it's the adjacent --</p> <p>12 I think it's the people that kind of come in and</p> <p>13 out. The --</p> <p>14 Q. I was wondering --</p> <p>15 A. It's like not in the jail, but it's like</p> <p>16 right next to it. It's Community something or</p> <p>17 other. I think those are people that come in at</p> <p>18 night and they go out and work during the day or</p> <p>19 come in -- on the weekend or something like that, I</p> <p>20 think. I don't know if it's the weekend people or</p> <p>21 not. So we were -- we were to do emergency</p> <p>22 responses over there only.</p> <p>23 Q. And what does BOP physicals refer to?</p> <p>24 A. BOP. There's so many of these little</p> <p>25 letter things. I think it's -- I think it's for</p>



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1 And let me tell you what I know, Dr. Montoya. I  
2 know that my office gave notice to Corizon that we  
3 were involved in this matter, and that there might  
4 be a lawsuit. And I know from some other documents  
5 that I've seen that that got the sentinel event  
6 process going, and that -- and I'm -- and I'm trying  
7 to reconstruct it.

8 I think Mr. Mishler sent this form in in  
9 response to a request from the headquarters in  
10 Nashville to get the process going. My question is:  
11 Do you have -- does that sound correct to you from  
12 what you've learned about this whole process?

13 A. I don't know if it was -- I don't know if  
14 it was in response to a lawsuit or not.

15 Q. Okay. Is it your understanding that the  
16 sentinel event process begins when the HSA sends a  
17 notification form to Nashville?

18 A. I think -- I think that's one of the  
19 things that can trigger it.

20 Q. Okay. Well --

21 A. I mean I --

22 Q. I don't see a document -- there's been no  
23 document provided to me that is a communication to  
24 you in writing that says: Please do this  
25 investigation. I'm wondering, did you receive a

1 Q. What was your understanding that the  
2 purpose of doing this investigation was?

3 A. Quality improvement, I guess, would be the  
4 biggest summary.

5 Q. Okay. So what did you do before writing  
6 your report?

7 A. I looked at the chart, read the chart. I  
8 talked to Kris and I looked at log notes from  
9 deputies.

10 Q. How many hours do you think you put into  
11 your investigation before you sat down to write the  
12 report?

13 A. Probably between one and two.

14 Q. Did you -- did you interview Ms. White  
15 again about what had happened?

16 A. You know, I don't recall if it was  
17 information that I had from our earlier discussion  
18 or if I asked -- talked to her again specifically  
19 about it.

20 Q. All right. So I need to back up kind of  
21 to what we were talking about when I took your  
22 deposition back in April. And you told me back in  
23 April that within a day or two of the event you had  
24 a conversation with Ms. White about the event. Do  
25 you recall that?

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1 document that told -- that instructed you to do an  
2 investigation or did it happen some other way?

3 A. I don't recall a document, sir.

4 Q. Had you ever done a investi- -- a sentinel  
5 event investigation prior to this case?

6 A. For Corizon?

7 Q. For Corizon, yeah.

8 A. I don't recall.

9 Q. Were you given any instructions on how to  
10 do a sentinel event investigation?

11 A. I think so.

12 Q. And who gave you the instructions?

13 A. I don't recall if it was Dr. Orr or Kevin,  
14 Kevin Mishler.

15 Q. Okay. It wasn't Mr. Legg?

16 A. I don't recall.

17 Q. Okay. And what instructions were you  
18 given? What were you told -- what were you told  
19 that Corizon wanted you to do?

20 A. I don't know. Like file a -- do like a  
21 summary.

22 Q. Okay. Were you instructed in any way in  
23 how to collect the information other than looking at  
24 the chart?

25 A. I don't recall.

1 A. Yeah, I think so.

2 Q. All right. Did you have another  
3 substantive conversation with Ms. White about what  
4 happened?

5 **MR. COLEMAN:** Asked and answered.

6 A. You know, like a year and a half later, I  
7 can't really tell you when I had the conversation,  
8 and if it was -- we have a lot of conversations. I  
9 mean, we talked while I'm there. We talk on the  
10 telephone so -- you know, multiple times a week,  
11 sometimes multiple times a day. Going back a year  
12 and a half and trying to figure out what day it  
13 was -- you know, I know I talked to her about it. I  
14 got her side of the scenario after the gentleman  
15 tried to kill himself.

16 And I'm sure we talked about it initially  
17 within, you know, the first bit of time. And did we  
18 talk about it later? Maybe. It's likely come up  
19 at -- somewhere along our discussions.

20 Q. All right. So --

21 A. Did I talk to her specifically prior to  
22 doing that? I don't recall what my thought process  
23 was at the time. I don't remember if I felt like it  
24 was better to just take what I already had and write  
25 the report or if I was going to go through it again.



<p style="text-align: right;">Page 152</p> <p>1 It's been so long ago, I just can't recall.</p> <p>2 <b>Q.</b> All right. Did you take any handwritten</p> <p>3 notes during any conversation that you had with</p> <p>4 Ms. White regarding that conversation with</p> <p>5 Ms. White?</p> <p>6 <b>A.</b> I don't know.</p> <p>7 <b>Q.</b> Do you still have any notes from any</p> <p>8 conversations with Ms. White?</p> <p>9 <b>A.</b> The only notes I have are the ones that</p> <p>10 you have there.</p> <p>11 <b>Q.</b> All right. Now, I'm handing you what was</p> <p>12 previously marked as Exhibit 26. And is -- are</p> <p>13 those the log notes that you looked at before you</p> <p>14 wrote your report?</p> <p>15 <b>A.</b> Well, let's see. Green was lodged,</p> <p>16 assaulting unknown female, smashed in a store</p> <p>17 window, checked out by medics for meth, housed, was</p> <p>18 asleep, being disruptive.</p> <p>19 I don't recall seeing -- I don't recall</p> <p>20 seeing page 1 about him being disruptive and why he</p> <p>21 was in jail and -- I don't recall seeing that first</p> <p>22 bit of them.</p> <p>23 Let's see. I don't recall seeing that</p> <p>24 first page. I don't recall seeing that page. I do</p> <p>25 think I saw some of these notes. I'm not sure if</p>	<p style="text-align: right;">Page 154</p> <p>1 <b>A.</b> I don't know.</p> <p>2 <b>Q.</b> Well, those notes are not made by Corizon</p> <p>3 employees. Correct?</p> <p>4 <b>A.</b> No.</p> <p>5 <b>Q.</b> All right. So these are notes made by</p> <p>6 Lane County Sheriff's Officers that work in the</p> <p>7 jail. Is that your understanding?</p> <p>8 <b>A.</b> That is my understanding.</p> <p>9 <b>Q.</b> So can you tell me how you happened to get</p> <p>10 them?</p> <p>11 <b>A.</b> I asked somebody to get them for me.</p> <p>12 <b>Q.</b> So who would you have asked?</p> <p>13 <b>A.</b> I don't know. I don't remember.</p> <p>14 <b>Q.</b> Did you ask a Corizon person or did you</p> <p>15 just ask somebody over at Lane County if you could</p> <p>16 look at them?</p> <p>17 <b>A.</b> I don't remember. Okay. I'm under oath.</p> <p>18 I'm telling you the truth. You can ask me the same</p> <p>19 question four times. I don't remember.</p> <p>20 <b>Q.</b> Have there been any other occasions when</p> <p>21 you've looked at log notes written by county</p> <p>22 employees?</p> <p>23 <b>A.</b> I think so.</p> <p>24 <b>Q.</b> Under what circumstances?</p> <p>25 <b>A.</b> I don't know if they're the exact same</p>
<p style="text-align: right;">Page 153</p> <p>1 they're the exact ones or not, but I don't -- I</p> <p>2 think they have one log, so I don't think it's -- I</p> <p>3 can't tell you verbatim if this is them but I think</p> <p>4 they are.</p> <p>5 <b>Q.</b> How did you look at the log notes? Did</p> <p>6 you look at them on paper or on a computer?</p> <p>7 <b>A.</b> I don't recall. I got them from</p> <p>8 somewhere.</p> <p>9 <b>MR. COLEMAN:</b> Just for the record,</p> <p>10 could you tell us the Bates label, the page number</p> <p>11 down at the bottom of the ones that has notes that</p> <p>12 you think you saw.</p> <p>13 <b>THE WITNESS:</b> I think -- I think it</p> <p>14 started with the bottom one on page No. 26, I think.</p> <p>15 2/12/13 at 12:05.</p> <p>16 <b>BY MR. ROSENTHAL:</b></p> <p>17 <b>Q.</b> How did you get the log notes?</p> <p>18 <b>A.</b> Or maybe it was the one above it. It</p> <p>19 might have been the one before that at 11:02.</p> <p>20 <b>Q.</b> So how did you get the log notes to look</p> <p>21 at them? What process did you use to see those log</p> <p>22 notes?</p> <p>23 <b>A.</b> I think I asked somebody to get me log</p> <p>24 notes.</p> <p>25 <b>Q.</b> Somebody that worked for Lane County?</p>	<p style="text-align: right;">Page 155</p> <p>1 thing or if they're some other -- I think it had to</p> <p>2 do with trying to look at like accommodations, like</p> <p>3 extra meals for people that have low blood sugars or</p> <p>4 low body weight. And I think there's a place that</p> <p>5 they put in their -- in their system, where you put</p> <p>6 stuff like that in there. I'm not sure it's the</p> <p>7 exact same thing as here, but I think that's in</p> <p>8 their system where we looked stuff like that up.</p> <p>9 Not very -- not very often.</p> <p>10 <b>Q.</b> All right. Now, I know you've told me</p> <p>11 that you don't know how you got the notes, but this</p> <p>12 question is a little bit different. Do you know</p> <p>13 whether there was any trouble getting the notes? In</p> <p>14 other words, did you have to go through any process?</p> <p>15 Sign any paperwork?</p> <p>16 <b>A.</b> I don't recall any specific trouble.</p> <p>17 <b>Q.</b> All right.</p> <p>18 <b>A.</b> I don't recall if there was a process or</p> <p>19 not, but I don't recall there being trouble.</p> <p>20 <b>Q.</b> Could I have that back, please?</p> <p>21 <b>A.</b> (Witness complies.)</p> <p>22 <b>Q.</b> Thank you. Now, on PRR 27, which is the</p> <p>23 third page of the exhibit, there's a log note by</p> <p>24 LC -- Lane County Sheriff's Officer Burnette, in</p> <p>25 which he talks about two phone calls he made to the</p>

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1 Corizon office reporting that Mr. Green wasn't  
2 moving.  
3 And in this log note he relates that  
4 whoever answered the phone in the Corizon office  
5 asked if Mr. Green was breathing and then after  
6 Mr. Burnette said he was breathing that the medical  
7 people, whoever it was he was talking to, quote  
8 (reading): Stated they would be back to  
9 evaluate him later in the day, but as long  
10 as he was breathing, there was no immediate  
11 concern, closed quote.  
12 Do you recall -- did you read that log  
13 note before --  
14 A. I believe so.  
15 Q. -- you wrote your report?  
16 A. It looks like I did.  
17 Q. All right. And did you make any effort to  
18 talk directly to Sheriff Burnette to see if he knew  
19 any more about what -- about those conversations or  
20 if he knew who he had talked to?  
21 A. No.  
22 Q. Why not?  
23 A. I just read the log note and did my  
24 report.  
25 Q. Did you make any effort to determine who

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1 he spoke with in the Corizon office, in the medical  
2 office?  
3 A. Yes.  
4 Q. What did you do to try to figure that out?  
5 A. Asked people.  
6 Q. Who did you ask?  
7 A. I don't know. Kevin maybe, Kris, other  
8 people, nurses.  
9 Q. Did you -- did you take a look and see who  
10 was working that day and deter- -- and then go  
11 through the roster and check everybody that was  
12 working that day and talk to them?  
13 A. No.  
14 Q. Why not?  
15 A. Not my job.  
16 Q. As part of your investigation you didn't  
17 feel that was part of your job?  
18 A. I thought the HSA was trying to figure  
19 that out.  
20 Q. Did the HSA ever tell you whether she had  
21 figured it out?  
22 A. No.  
23 Q. Now, when I took your deposition back in  
24 April, we talked a bit about when PA White,  
25 Ms. White, left the jail. Do you recall that

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1 conversation?  
2 A. No.  
3 Q. Okay. Well, I'll try to refresh your  
4 recollection. We talked about the fact that  
5 according to her time records, she left the jail  
6 about a half hour before the ambulance was called.  
7 Does that -- do you remember that now?  
8 A. Vaguely.  
9 Q. All right. Is that something that you  
10 knew before I brought it up in the deposition with  
11 you in April?  
12 A. I don't recall.  
13 Q. All right. That's not something that got  
14 into your report and that's why I'm asking you.  
15 A. Okay.  
16 Q. Do you have any recollection at all as to  
17 whether you knew that?  
18 A. I don't recall.  
19 Q. Have you made any effort to follow up on  
20 that information since your deposition?  
21 A. You know, I've been busy taking care of  
22 other patients and trying to do the best we can over  
23 there so I haven't been going back a year and a  
24 half, looking at stuff like that, no, sir.  
25 Q. There's another log book that the jail

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1 has. It's been previously marked as Exhibit 20. I  
2 Just want to know whether you ever looked at that.  
3 A. Was that included in --  
4 Q. No, it wasn't. Thank you.  
5 (Pause.)  
6 A. I don't recall. I don't know what this  
7 other stuff is about. I don't know if I saw this  
8 other part regarding Green or not.  
9 Q. Okay. Now, this is another form of the  
10 log notes. It's Exhibit 4, and it starts on the  
11 third page. And I'm wondering if maybe this is what  
12 you looked at.  
13 (Pause.)  
14 A. I don't recall reading -- ever reading  
15 about him assaulting a female or smashing a store  
16 window or using meth, so I don't think I saw that.  
17 I don't think I saw this part about his failing to  
18 complete the laundry exchange or changing his  
19 clothes. It's not the same stuff we looked at  
20 already?  
21 Q. It appears similar to me. It's in a  
22 different format. It was given to me in that  
23 format.  
24 A. I don't recall the part about him being  
25 disruptive in P Pod, kicking the door. I don't

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1 recall the part about him pacing and sitting on the  
2 bunk. I think -- this looks like the same stuff I  
3 looked at, that you showed me before.  
4 **Q.** Well, it appears similar to me also. Like  
5 I said, I'm showing it to you because it's in a  
6 different format, and I'm wondering if that's the  
7 format you saw it in?  
8 **A.** I can't even tell a difference in the  
9 formats.  
10 **Q.** Okay.  
11 **A.** Hang on. I'm not finished. Okay. Page  
12 -- it says page 7 of 9 looks similar to what I've  
13 looked -- seen before. I can't tell you if that's  
14 different or the same than the other piece of paper  
15 you showed me. One or the other looks familiar. I  
16 think I reviewed those. It looks to me like the  
17 exact same thing you showed me before, so I can't  
18 tell you the difference.  
19 **Q.** So you were aware from reading these notes  
20 that during the time that his head was being  
21 stitched that he had defecated?  
22 **A.** Let me see.  
23 **Q.** It's the 12:05 entry.  
24 **A.** Oh, I remember now. I remember reading a  
25 part about him flexing his stomach and grunting.

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1 And then somebody asked him if he was pooping, and  
2 he did not reply. And then -- I remember that part.  
3 **I don't actually remember reading (reading):** A  
4 few minutes later the odor confirmed that he  
5 had soiled his pants.  
6 **Q.** But were you aware that -- from any source  
7 that he had defecated on himself while he was in the  
8 medical clinic and his head was being sutured?  
9 **A.** I can't recall exactly when I -- I do  
10 remember him having pooped his pants, defecated. I  
11 don't recall remembering exactly when that was.  
12 **Q.** Was it your understanding that that  
13 happened before he was taken to his jail cell?  
14 **MR. COLEMAN:** Eldon, just to clarify,  
15 you're asking him if he -- that was his  
16 understanding at the time he was writing the report?  
17 **MR. ROSENTHAL:** Correct.  
18 **A.** At the time I was writing the report?  
19 **BY MR. ROSENTHAL:**  
20 **Q.** Right. Were you aware at the time you  
21 were writing your report that Mr. Green had  
22 defecated on himself while in the wheelchair in the  
23 medical clinic having his head sutured and before he  
24 was taken to his jail cell?  
25 **A.** I think so.

1 **Q.** All right. Did you consider that to be  
2 any indication that there was a spinal cord injury?  
3 **A.** I wasn't there.  
4 **Q.** Well, when you were writing your report,  
5 did it -- did you think to yourself, That goes along  
6 with a spinal cord injury?  
7 **A.** Not necessarily. We have people at the  
8 jail who will poop themselves, poop the floor, poop  
9 the wall, poop in their mouth. I mean, it's  
10 disgusting. So we see a lot of poop, unfortunately.  
11 **Q.** At the time you wrote this report, to your  
12 understanding, when a person suffers a spinal cord  
13 injury, is one of the symptoms that they lose bowel  
14 control?  
15 **A.** It can be, yes.  
16 **Q.** And you knew that when you wrote this  
17 report.  
18 **A.** Yes.  
19 **Q.** But you didn't put anything about that  
20 topic in this report. Why is that?  
21 **A.** Because it sounded like he was grunting  
22 and trying to poop --  
23 **Q.** So --  
24 **A.** -- based on that report.  
25 **Q.** So it was your opinion at the time you

1 wrote the report, that that was a voluntary action  
2 on his part.  
3 **A.** It was a possibility. I don't know that I  
4 would say it was my opinion. It was a possibility.  
5 **Q.** Was it also a possibility that he had a  
6 spinal cord injury?  
7 **A.** After he rammed his head into the wall?  
8 **Q.** Yeah.  
9 **A.** Yes.  
10 **Q.** All right. So why didn't you put in the  
11 report that the defecation was further -- was  
12 consistent with having suffered a spinal cord injury  
13 when he hit his head on the wall?  
14 **A.** Because this was all after the fact. What  
15 does that matter?  
16 **Q.** Well, I thought that you were trying to do  
17 something to improve the quality of care at the Lane  
18 County Jail.  
19 **A.** Absolutely.  
20 **Q.** So did you think that that was something  
21 that you should perhaps discuss --  
22 **A.** When he pooped? No, I did not.  
23 **Q.** All right. Were you aware before you  
24 wrote your report that no one had cleaned Mr. Green  
25 from the time he defecated until after 4:00 p.m.?

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1 A. At what point are you asking?  
 2 Q. Before you wrote your report.  
 3 A. Before I read that log? After I read the  
 4 log and before I wrote the report?  
 5 Q. Yes.  
 6 A. Whatever the -- I don't recall the times.  
 7 Whatever the report said, I read the log notes that  
 8 we've already discussed. I don't recall the time  
 9 difference.  
 10 Q. Were you at all concerned about the fact  
 11 that Mr. Green had lain in his own feces for four or  
 12 five hours?  
 13 A. From a medical standpoint or from a  
 14 humanistic standpoint?  
 15 Q. Well, let's go medical first, if they're  
 16 different, and then we'll discuss that.  
 17 A. Yeah. That's unsanitary.  
 18 Q. All right. Why didn't you put something  
 19 about that in your report?  
 20 A. The purpose of the report, as I saw it,  
 21 was kind of the events immediately after he tried to  
 22 kill himself, after he rammed his head into the  
 23 wall, and they were bleeding, and the transportation  
 24 issues, you know. I wasn't focusing on the stool so  
 25 much.

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1 Q. You told me in your deposition back in  
 2 April that you thought Mr. Green had suffered a  
 3 spinal cord injury when he hit his head against the  
 4 wall. Is that -- do you recall telling me that?  
 5 A. I think it's highly probable.  
 6 Q. All right. Was it your opinion when you  
 7 wrote the report that he was able to move his limbs  
 8 for some period of time after hitting his head  
 9 against the wall?  
 10 A. Repeat that question.  
 11 Q. Was it your opinion at the time you wrote  
 12 the report that Mr. Green was able to voluntarily  
 13 move his limbs after he rammed his head into the  
 14 wall?  
 15 A. The only thing that I saw was a log note  
 16 that says that he crossed his legs.  
 17 Q. All right. So was it your opinion that he  
 18 was not a quadriplegic at that time?  
 19 A. You could say that, yes.  
 20 Q. All right. So did you form an opinion as  
 21 to when he became quadriplegic?  
 22 A. No.  
 23 Q. Did -- did you believe that he -- his  
 24 quadriplegia was a result of the spinal cord injury  
 25 plus delay in treatment?

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1 A. It's possible. Certainly if he didn't ram  
 2 his own head into the wall, there would be no  
 3 paralysis. So I think that is part of it.  
 4 Q. Sure.  
 5 A. Exactly what happened after that, when --  
 6 you know, the -- he became completely quadriplegic  
 7 was probably -- let's see. When was that? When was  
 8 the log note that he crossed his legs? How far  
 9 after that was the --  
 10 Q. That was in the courtroom.  
 11 A. So that was within a minute?  
 12 Q. Well, I don't know about a minute, but it  
 13 was within five or ten minutes for sure.  
 14 A. So it would be anytime -- I think the  
 15 major injury occurred -- self-inflicted,  
 16 unfortunately -- after he rammed his head into the  
 17 wall -- dove into the wall, from what I understand.  
 18 Q. So --  
 19 A. And then, you know, whether there was some  
 20 further injury, I don't know.  
 21 Q. So did you ever ask Ms. White why she  
 22 didn't immediately call for an ambulance if this man  
 23 had a spinal cord injury and was laying on the floor  
 24 in the courtroom?  
 25 A. I did not ask her that specific question,

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1 no.  
 2 Q. Did you conclude that she should have  
 3 called an ambulance?  
 4 A. Immediately while he was laying in the  
 5 courtroom?  
 6 Q. Yeah.  
 7 A. I don't know about that.  
 8 Q. What should she have done?  
 9 A. In -- in hindsight being 20/20, probably  
 10 put a C collar on him and put him on a backboard.  
 11 Q. And done what with him? Done what after  
 12 she put him on a backboard?  
 13 A. Probably stitched his head up and stopped  
 14 the bleeding or done something to stop the  
 15 bleeding -- staple it or something like that -- and  
 16 then done some further evaluation to determine if he  
 17 needed further treatment or not.  
 18 Q. Well, you wrote in your report (reading):  
 19 Problem No. 2: Patient with concern for  
 20 possible spinal injury cleared without  
 21 imaging. Recommendation: All patients with  
 22 possible spinal injury receive imaging  
 23 before being cleared. Implementation:  
 24 Immediate.  
 25 A. That's what I just told you. She -- after

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1 stabilize, do further evaluation.  
 2 Q. And does Lane County Jail have the ability  
 3 to do imaging of spinal cord?  
 4 A. Yes.  
 5 Q. In the jail?  
 6 A. Yes.  
 7 Q. What type of machinery is available in the  
 8 jail?  
 9 A. X-ray.  
 10 Q. Is there any MRI or CAT scan ability in  
 11 the jail?  
 12 A. No.  
 13 Q. And was the X-ray equipment available at  
 14 the time in the jail?  
 15 A. I don't know.  
 16 Q. Is X-ray equipment now?  
 17 A. Sometimes.  
 18 Q. I don't know what you mean by sometimes.  
 19 A. It comes in, it's there, and then they  
 20 take it out.  
 21 Q. Where does it come from?  
 22 A. Mobile imaging people.  
 23 Q. So did Ms. White in February of 2013 have  
 24 the ability to call for a mobile X-ray unit to be  
 25 brought into the jail?

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1 A. Yeah. I don't know how long it would take  
 2 to get there or not.  
 3 Q. All right. So when you wrote "Problem  
 4 No. 2: Patient with concern for possible spinal  
 5 injury cleared without imaging," what you meant was  
 6 that he should have been imaged in the jail?  
 7 A. I didn't say that. He should be imaged.  
 8 Q. Well, did you have an opinion as to  
 9 whether he should have been imaged in the jail or  
 10 whether he should have been immediately sent to a  
 11 hospital?  
 12 A. Not necessarily.  
 13 Q. Not necessarily? I don't understand "not  
 14 necessarily." What do you mean?  
 15 A. Do I -- did I have an opinion?  
 16 Q. Yes.  
 17 A. Not means no. Necessarily means not  
 18 necessarily.  
 19 Q. So do you -- are you telling me that you  
 20 did not have an opinion at the time or that your  
 21 opinion was that it was not necessary to send him to  
 22 the hospital?  
 23 A. When are you talking about, when I wrote  
 24 the report?  
 25 Q. When you wrote the report.

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1 A. I didn't specify one way or the other. I  
 2 think it would depend on other factors in addition  
 3 to, you know, does the person have spinal cord  
 4 injury, you know, what does their physical exam  
 5 show, what does their other findings show, that type  
 6 of thing. And then, you know, you put the whole  
 7 picture together, and then you make a clinical  
 8 assessment.  
 9 It's very difficult for me to give you an  
 10 opinion after we know what happened, after -- you  
 11 know, hindsight is 20/20. What exactly -- because I  
 12 wasn't there. Yes, people who -- you have --  
 13 concerned about spinal cord injury should have  
 14 imaging done, absolutely.  
 15 Q. And should the imaging be a simple X-ray  
 16 or should it be something more sophisticated?  
 17 A. It depends on your clinical suspicion. I  
 18 have seen too many times to count that people were  
 19 cleared with X-rays.  
 20 Q. I don't know what you mean by "cleared  
 21 with X-rays."  
 22 A. They get an X-ray done and they're fine  
 23 and they -- you're done worrying about their spinal  
 24 cord injury.  
 25 Q. So --

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1 A. I've also seen people get MRIs. I've also  
 2 seen people get CAT scans.  
 3 Q. All right. Did you think Mr. Green was at  
 4 risk for subdural hematoma after having hit his head  
 5 against the wall hard enough to cause a spinal  
 6 injury?  
 7 A. Did I think that when?  
 8 Q. When you wrote the report.  
 9 A. I wasn't specifically concerned about that  
 10 because I knew the whole scenario, the way the  
 11 things had panned out.  
 12 Q. Was -- is -- can subdural hematoma be a  
 13 fatal injury?  
 14 A. Potentially.  
 15 Q. And is it something that needs to be  
 16 properly attended to if it in fact is present?  
 17 A. Depends.  
 18 Q. Can someone suffer significant brain  
 19 injury if a subdural hematoma is not treated for  
 20 several hours?  
 21 A. Depends on the size of it.  
 22 Q. So is the answer yes?  
 23 A. It depends on the size of it. The answer  
 24 is yes, if it's large, and no, if it's small.  
 25 Q. All right. If someone rams their head



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1 into a wall hard enough to cause spinal injury,  
2 should the patient -- should the person taking care  
3 of that patient also be concerned about subdural  
4 hematoma?  
5 A. Depends on their clinical findings.  
6 Q. And can subdural hematoma be evaluated  
7 with an in-jail X-ray?  
8 A. No.  
9 Q. Why didn't you put in your report anything  
10 about Ms. White ignoring the possibility of subdural  
11 hematoma?  
12 A. Well, I didn't put the possibility of  
13 subdural hematoma, I didn't put the possibility of a  
14 nasal fracture or an orbital fracture or a tear on  
15 his ear because we know what the scenario was. I  
16 didn't go through and list the potential of 200  
17 things that could have been tested for. We know  
18 what happened. We look -- we're looking at the  
19 facts. We're looking at the scenario, so that's  
20 why.  
21 Q. So the facts are that Ms. White had a  
22 patient lying on the floor in the jail --  
23 A. That's a fact.  
24 Q. -- who had rammed his head into the wall,  
25 who had a somewhat altered state of awareness, at

1 Q. So if a patient is lying on the floor  
2 saying that he's paralyzed and saying that he's --  
3 his ears are paralyzed and he's bleeding from the  
4 head, is it your opinion that it is not necessary to  
5 send that patient immediately away from the jail to  
6 the hospital? Is that your opinion?  
7 A. You said a patient's laying on the  
8 floor --  
9 Q. Claims that he's paralyzed --  
10 A. -- claims that he's paralyzed, claims that  
11 his ears are paralyzed.  
12 Q. -- claims that his ears are paralyzed.  
13 He's bleeding. And he's got --  
14 A. So what is his --  
15 **THE REPORTER:** I'm sorry --  
16 **BY MR. ROSENTHAL:**  
17 Q. -- pupils that are slightly reactive to  
18 light rather than normally reactive to light.  
19 Should that patient be immediately sent to the  
20 hospital?  
21 A. It depends. It depends on what your  
22 physical exam findings show.  
23 Q. Did you --  
24 A. I -- you know, is he paralyzed? What does  
25 the physical exam show? You know, try to clarify

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1 least according to her notes --  
2 A. That I don't know.  
3 Q. -- who had her -- had pupils that were not  
4 normally reactive to light --  
5 A. I'd have to look at the chart again on  
6 that.  
7 Q. Well, that's what it says. -- and that he  
8 was claiming that he was paralyzed, and he was  
9 claiming that his ears were paralyzed.  
10 What did you think he meant by his ears  
11 were paralyzed? Did you draw any medical --  
12 A. That's --  
13 Q. -- inference?  
14 A. That is a hard one to put a finger on. I  
15 don't recall ever learning in my medical training --  
16 that's not to say it's never happened, but I don't  
17 recall in my medical training people talking about  
18 their ears getting paralyzed. Just that they can't  
19 hear.  
20 Q. If someone has a concussion, do they have  
21 auditory symptoms?  
22 A. They can. I don't -- never heard -- say  
23 that their ears were paralyzed.  
24 Q. So --  
25 A. Ringing in their ears, that type of thing.

1 what he means if his ears are paralyzed. So there  
2 would be potential scenarios for any number of  
3 different ways of treating that.  
4 Q. Were you aware that --  
5 A. I've seen people who were laying there,  
6 telling me they're paralyzed, and then they get up a  
7 minute later and they walk around, so you just don't  
8 know.  
9 Q. Were you aware before you wrote your  
10 report that Lieutenant Brown had done an  
11 investigation and had collected written statements  
12 from all the deputies that were involved either in  
13 the courtroom or in the jail with Mr. Green on  
14 February 12th?  
15 A. Before I wrote my report?  
16 Q. Yes.  
17 A. I don't recall.  
18 Q. Did you -- you knew that Lieutenant Brown  
19 was in charge of the jail?  
20 A. I knew he was in charge of part of the  
21 jail. I don't know if he's in charge of the whole  
22 jail or --  
23 Q. Did you ask him whether he did an  
24 investigation or collected reports from the various  
25 officers involved?



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1 A. I don't recall.  
 2 Q. Did you look at the ambulance report, the  
 3 report from the emergency medical people that showed  
 4 up at the jail?  
 5 A. Do you have a copy of it --  
 6 Q. I do.  
 7 A. -- to stimulate my memory?  
 8 Q. Sure.  
 9 A. I don't recall specifically or not.  
 10 Q. It's Exhibit 47.  
 11 (Pause.)  
 12 A. I don't recall seeing this, that I can  
 13 recall.  
 14 Q. Did you interview Jacob Pleich before  
 15 writing your report?  
 16 A. I don't -- I would not say I interviewed  
 17 him.  
 18 Q. You simply looked at his report that he  
 19 wrote from the time?  
 20 A. I don't think so.  
 21 Q. You don't think you looked at his report?  
 22 A. I'd have to see it.  
 23 Q. It's in the chart there. It's in the back  
 24 of that exhibit. It's page 3388, way at the back.  
 25 I believe it's only that one page, 3388.

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1 A. Oh, sorry. I was on the wrong page here.  
 2 This looks like something -- I don't know what that  
 3 is. Yeah. If these were in the chart, I think I  
 4 looked at them.  
 5 Q. So why didn't you interview him about what  
 6 had happened? He was in the jail cell about 2:30.  
 7 Why didn't you interview him?  
 8 A. In the jail cell at 2:30?  
 9 Q. He was in Mr. Green's jail cell at 2:30?  
 10 A. Oh. You know, my -- the gist of my sort  
 11 of evaluation and report was the spinal cord injury,  
 12 is what I was kind of focusing on.  
 13 Q. Why don't we take a short break. This  
 14 would be a good place to take a break.  
 15 **THE VIDEOGRAPHER:** We're off the  
 16 record at 2:47 p.m.  
 17 (Recess: 2:47 p.m. to 2:59 p.m.)  
 18 **THE VIDEOGRAPHER:** We're back on the  
 19 record at 2:59 p.m.  
 20 **BY MR. ROSENTHAL:**  
 21 Q. Dr. Montoya, when you wrote your report,  
 22 were you aware that there were video cameras that  
 23 captured things that occurred in the jail hallways  
 24 and in the jail cells?  
 25 A. Yes.

1 Q. Did you -- did you ask to look at the  
 2 video -- I don't know whether it's videotape. I  
 3 guess it was actually an electronic disk, but did  
 4 you ask to look at the video before you wrote your  
 5 report?  
 6 A. No.  
 7 Q. Were -- did you have any knowledge as to  
 8 whether or not there was video from the jail cell  
 9 that Mr. Green was in from approximately 11:30 in  
 10 the morning until he was picked up by the emergency  
 11 people between 4:30 and 5:00?  
 12 A. You know, my main focus when writing the  
 13 report was really -- I'm kind of the initial triage  
 14 and evaluation and some of the communication stuff,  
 15 so I guess I didn't think that looking at the video  
 16 was, you know, going to change a lot of that.  
 17 Q. Well, if on the video you would have seen  
 18 that he appeared to be paralyzed, would that have  
 19 gotten into your report?  
 20 A. Well, I know --  
 21 Q. If you'd looked at the video --  
 22 A. I know in retrospect from -- you know,  
 23 down the road, the patient was paralyzed, so I'm not  
 24 sure that I would change my report by looking at a  
 25 video of a paralyzed person.

1 Q. Well --  
 2 A. I've seen paralyzed people before. I  
 3 don't know that that's going to change the way that  
 4 I would recommend, you know, improving care for  
 5 potential spinal injuries.  
 6 Q. I'm having trouble understanding that,  
 7 Dr. Montoya, because if you would have looked at the  
 8 video and if it was obvious from a video at noon  
 9 that the man was paralyzed and yet he stayed in the  
 10 jail for another five hours, wouldn't that have been  
 11 something you would have wanted to call to PA  
 12 White's attention and perhaps discipline her for not  
 13 properly responding to a paralyzed patient?  
 14 A. Let's see. How can I answer that? Repeat  
 15 the question.  
 16 Q. If you had looked at the video and seen  
 17 that at approximately noon Mr. Green was visual --  
 18 to the visual eye paralyzed, isn't that something  
 19 that you would have wanted to take up with PA White  
 20 and perhaps discipline her for it, for not treating  
 21 a patient properly?  
 22 A. The -- I think the purpose of what we're  
 23 trying to do with the report here is improve the  
 24 quality, not necessarily discipline people, firstly.  
 25 Secondly, we know that the gentleman was paralyzed.

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1 I know what paralysis is, sir. I know what it looks  
2 like.  
3 Q. Do you --  
4 A. So looking at a video of it, when it's  
5 documented other places that the patient wasn't  
6 moving, I don't think changes really my  
7 recommendation. It might look good for a jury, but  
8 it doesn't change how I feel about taking care of  
9 people.  
10 Q. Do you feel that -- that PA -- did you  
11 feel when you wrote the report that PA White had  
12 done anything wrong in taking care of Mr. Green?  
13 A. I draw your attention to the report, and I  
14 did make some recommendations and some problems.  
15 Q. All right. But --  
16 A. We want to take care of people the best  
17 that we can. Okay. That's what we do. That's why  
18 I spent years of my life studying medicine. And  
19 this is what we're trying to do with this report is  
20 improve the quality of care that we provide to  
21 people.  
22 (Reading): No. 2. Patient with  
23 concern for possible spinal injury cleared  
24 without imaging. Recommendation: Patients  
25 with spinal -- possible spinal injury

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1 receive imaging before being cleared.  
2 Okay. So the fact that that wasn't done,  
3 if you want to change the wording and say: Do I  
4 think that she made a mistake? Well, I think she  
5 should have done this, yeah.  
6 Q. Well, did you think that she did the  
7 neurologic exam that she wrote in her chart?  
8 A. Yes.  
9 Q. You believe that?  
10 A. Why wouldn't I?  
11 Q. I'm asking you if you believed it.  
12 A. I think I just said yes.  
13 Q. All right. So you believed that his arms  
14 and legs could move when he was in the courtroom?  
15 A. I need to look at the chart to refresh my  
16 memory. Let's see. What page is that on here?  
17 Q. It's on page 3382 it starts.  
18 A. (Reading): Patient's mental baseline  
19 according to witnesses is appropriate.  
20 Q. You don't need to read it out loud. Just  
21 read it to yourself and then answer my question: Do  
22 you think that Ms. White -- according to Ms. White  
23 that he could move his limbs? Right at the top of  
24 page 3383 it says (reading): States he is  
25 paralyzed but is moving all extremities.

1 A. Your question is?  
2 Q. Did you -- do you believe that that is  
3 true -- that that is in fact true?  
4 A. Yes.  
5 Q. All right. And you don't think it would  
6 have helped you evaluate whether or not that is in  
7 fact true or whether in fact Ms. White wrote  
8 something down that is not correct if you had looked  
9 at the video?  
10 A. Of him in the courtroom?  
11 Q. There's no video in the courtroom.  
12 There's video of him being transported to the  
13 clinic --  
14 A. Well, this is in the courtroom?  
15 Q. That's right. So --  
16 A. After he left --  
17 Q. -- there's no video of that, correct.  
18 A. Well, I don't see how that would help me  
19 on this scenario right here. I guess I don't  
20 understand your question.  
21 Q. Has anyone told you that the judge's clerk  
22 has testified in deposition in this case that there  
23 was no neurologic exam done? She watched everything  
24 that happened and there was no neurologic exam done.  
25 Are you aware of that?

1 A. No, sir.  
2 Q. Nobody told you that?  
3 A. I think I just answered that --  
4 Q. Nobody --  
5 A. -- when I said, "No, sir."  
6 Is that a different question?  
7 Q. And has anyone told you that the  
8 registered nurse that was in the courtroom with  
9 Mr. White [sic] testified that Ms. White was always  
10 up at the head of the patient, that she never moved  
11 around to other parts of the body?  
12 A. I haven't been told of anybody else's  
13 testimony.  
14 Q. All right. And you haven't interviewed  
15 any of the nurses -- is that correct? -- about what  
16 happened in the courtroom.  
17 A. I don't think I did. I've read the  
18 reports.  
19 Q. Did you interview the HSA -- the acting  
20 HSA, Ms. Thomas -- regarding any aspect of what  
21 happened before you wrote your report?  
22 A. I think it came up. I don't know if you  
23 would call it an interview. I think the -- some  
24 aspects of the case had come up in various  
25 conversations or meetings or that type of thing.

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1 Q. Did you ask her why there was no cervical  
2 collar or backboard available in the jail?  
3 A. No. I didn't ask her that, no.  
4 Q. Did you ask anybody about that?  
5 A. It was determined that there wasn't one  
6 immediately available.  
7 Q. Well, was it determined that there wasn't  
8 even one available, period?  
9 A. I'm not sure where the nearest one was. I  
10 don't think there was one that was readily  
11 available.  
12 Q. Was any additional equipment purchased  
13 after you wrote your report?  
14 A. I believe we have the C collar and the  
15 spine board.  
16 Q. Who took care of that?  
17 A. HSA, I believe.  
18 Q. But you're not sure?  
19 A. I'm not sure. Some of the equipment is  
20 purchased by Corizon and some of the equipment, I  
21 believe, is purchased by the county. And I'm not  
22 sure which organization actually obtained the  
23 equipment.  
24 Q. After you wrote your report, what did you  
25 do with your report? Who did you send it to?

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1 A. It made its way to Dr. Orr. I don't know  
2 if I gave it to the HSA and they forwarded it or if  
3 I sent it directly to him.  
4 Q. So I'm trying to determine when your  
5 report was written. It says April 23rd, if you look  
6 at page 3367 in the exhibit there. So it says  
7 Report Date: April 23rd. And then up on the top  
8 there, it looks like there's a -- there's some fax  
9 information. So did you write the report on April  
10 23rd? Is that when it was completed?  
11 A. According to what I wrote there, I believe  
12 that's the case.  
13 Q. All right. And do you know who you gave  
14 the report to after you wrote it?  
15 MR. COLEMAN: Asked and answered.  
16 BY MR. ROSENTHAL:  
17 Q. Well, I want to be sure. Do you know who  
18 you gave the report to or did you mail it to  
19 somebody?  
20 MR. COLEMAN: Go ahead and answer it  
21 again.  
22 A. As I stated previously, I believe it made  
23 its way to Dr. Orr. Whether or not I sent it  
24 directly to him or I asked the HSA to send it to him  
25 or I asked the office assistant to send it to his

1 fax number, I do not recall.  
2 BY MR. ROSENTHAL:  
3 Q. Now, you listed seven problems on the  
4 second page of your report. So those seven  
5 problems, are those items that you thought needed  
6 correction?  
7 A. Yes.  
8 Q. Were there any other items that you  
9 thought needed correction that you didn't put in  
10 your report?  
11 A. At the time?  
12 Q. Yes.  
13 A. No.  
14 Q. Now, after you sent your report to  
15 Dr. Orr, what is your understanding of what happened  
16 with your report?  
17 No. Excuse me. That's not a good  
18 question. Let me start that again.  
19 After you sent your report to Dr. Orr, did  
20 you have any further contact with Dr. Orr about your  
21 report?  
22 A. I don't recall.  
23 Q. Take a look at --  
24 A. I think we -- I think he probably  
25 mentioned it to me at some point in time afterwards.

1 Q. Did he ask you to change anything?  
2 A. No.  
3 Q. Is this the only version of the report  
4 that you ever submitted to anybody, the one that  
5 we're looking at together?  
6 A. Yeah. I only did one.  
7 Q. All right. So take a look, please, at  
8 Dr. Orr's report, page 3366 -- if you go forward one  
9 page. Did you see this report back in 2013?  
10 A. I don't think so. Let me read it here.  
11 (Pause.).  
12 Yeah. I don't think I saw this back in  
13 2013.  
14 Q. Take a look at the page in front of that,  
15 page 3365. Is that your signature on the lower  
16 left-hand corner?  
17 A. Yes, it is. Well, it's my initial.  
18 Q. So it's -- you didn't write Montoya, John  
19 [sic], MD? You just initialed it?  
20 A. Well, that's not my signature. That's my  
21 name, and then my initial.  
22 Q. All right. Did you print your name before  
23 you put your initials down?  
24 A. Yes.  
25 Q. All right. And this document -- your

<p style="text-align: right;">Page 200</p> <p>1 page 3369, the Sentinel Event Review Committee 2 Feedback. Did you see that document in 2013? 3 A. I don't recall. 4 Q. And then if you'd look at the first page 5 of the packet, 3364, did you see that piece of paper 6 in 2013 or on a computer? 7 A. It doesn't look familiar. 8 Q. All right. I'm interested -- it says in 9 the lower left-hand corner, "Site medical director 10 review," and then it says "Category 4," and then it 11 has your name. Do you know what that refers to, 12 that Category 4? 13 A. Um, yeah. 14 Q. What does that refer to? 15 A. Well, I'd have to -- I'd have to look at 16 the exact definition of -- I know there's 17 categorizations. There's different categories for 18 different types of events. 19 Q. There's different types of sentinel 20 events? 21 A. Yeah. 22 Q. All right. Is Category 4 the most 23 serious? 24 A. I'd have to look at the -- 25 Q. I'm looking at 3365. I see it's checked</p>	<p style="text-align: right;">Page 202</p> <p>1 recall correctly. 2 But here's my question: Did the chief 3 medical officer of Corizon ever talk to you about 4 this event? 5 A. Dr. Kelde? 6 Q. Well, Kelde was the chief medical officer 7 when the event occurred and then somebody -- 8 A. I think I just talked to Dr. Orr, if I 9 recall. 10 Q. Okay. So did anyone ever tell you what 11 the patient safety committee was recommending based 12 upon your report and Dr. Orr's report? 13 A. No. 14 Q. You had various recommendations in your 15 report so I'd like you to look at that again, 3368. 16 So regarding documentation, you had a recommendation 17 (reading): All chart notes and orders need 18 to be signed, timed, and dated. 19 Who were you making that recommendation 20 to? 21 A. I don't know. In general. 22 Q. And did -- 23 A. Everybody. Nobody in particular. 24 Q. Did your report go to the nursing staff or 25 to the HSA at Lane County Jail or did it just go to</p>
<p style="text-align: right;">Page 201</p> <p>1 there, the box 4 is checked right above your 2 initial. 3 A. Well, I'd have to look at the descriptors 4 to give you an exact answer. 5 Q. Okay. You don't recall offhand. 6 A. I don't have them on the top of my head, 7 no. 8 Q. Okay. All right. Did you ever talk to 9 anybody from Nashville on the Patient Safety 10 Committee or on the Sentinel Event Review Committee 11 about this event? 12 A. No. 13 Q. And do you know who this person is, Tonya 14 Mooningham? Do you know who that person is? 15 A. I don't know her, huh-uh. I kind of heard 16 the name somewhere, I think, but -- 17 Q. But you never spoke with her. 18 A. I don't think so. 19 Q. All right. Did anyone -- Dr. Orr or 20 anyone -- well, actually, let me ask you -- let me 21 back up. 22 I know Dr. Kelde (phonetic) was the chief 23 medical officer for Corizon when the event happened. 24 I don't recall the name of the person that took his 25 place. He left before you did your report, if I</p>	<p style="text-align: right;">Page 203</p> <p>1 Dr. Orr? 2 A. It might have gone to the HSA. I don't 3 know. I don't recall exactly if I gave it to the 4 HSA and then they forwarded it on or -- 5 Q. I guess my -- 6 A. -- if I gave to Dr. Orr directly. 7 Q. Yeah. My question was poor. Let me 8 restate my question. 9 Was this something that you expected the 10 HSA to read? 11 A. I -- I expected the HSA to be involved in 12 the process, yeah. 13 Q. Okay. Now, were any steps taken to follow 14 your recommendation regarding Problem No. 1? 15 A. Yeah. 16 Q. What steps were taken? 17 A. Everybody was told to make sure you put 18 date and time on all -- on everything. 19 Q. And who told them? 20 A. I don't recall. 21 Q. Did you? 22 A. Maybe. 23 Q. All right. Problem No. 2 -- 24 A. It was either me -- at maybe a staff 25 meeting -- either myself or somebody. I know it got</p>

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1 talked about, sure.  
 2 **Q.** Recommendation under Problem No. 2 is  
 3 (reading): All patients with possible  
 4 spinal injury receive imaging before being  
 5 cleared.  
 6 Was that recommendation acted upon?  
 7 **A.** Yeah.  
 8 **Q.** And how was that acted upon?  
 9 **A.** Patients with suspected spinal injuries  
 10 are -- get imaging done.  
 11 **Q.** How did that get communicated to the  
 12 staff?  
 13 **A.** To the providers.  
 14 **Q.** Who told them?  
 15 **A.** Me.  
 16 **Q.** When?  
 17 **A.** And Kris.  
 18 **Q.** Did Ms. White acknowledge that she had  
 19 made a mistake in not having Mr. Green imaged?  
 20 **A.** I don't recall her -- specifically whether  
 21 or not she said that. You know, we talked about the  
 22 case and different types of things that probably  
 23 should be done different next time, and I think this  
 24 was one of them.  
 25 **Q.** Then Problem No. 3, you recommended

1 **Q.** And how was it acted upon?  
 2 **A.** Talked to Kris about making sure orders  
 3 get put in there.  
 4 **Q.** Then Problem No. 5 [sic], the neurological  
 5 checks weren't done -- oh, that's the same thing.  
 6 Your recommendation was (reading): All nursing  
 7 orders to be written in order sheet.  
 8 And then Problem No. 7, you wrote the  
 9 problem is (reading): Medical follow-up not  
 10 done because staff believed the patient was  
 11 being released.  
 12 And your recommendation was  
 13 (reading): Institute process to ensure  
 14 all medical follow-up is done until  
 15 confirmed release. HSA should be involved  
 16 in this planning.  
 17 Was that recommendation followed up on?  
 18 **A.** I'd have to check with the HSA to see  
 19 exactly how that was implemented.  
 20 **Q.** Did you have anything to do with however  
 21 it was implemented?  
 22 **A.** Not specifically, no.  
 23 **Q.** Now, were you aware that Dr. Orr was  
 24 recommending mandatory in-service for all clinicians  
 25 and clinical staff regarding the approach to

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1 (reading): All patients with possible  
 2 spinal injury not placed in C-collar or on  
 3 spine board until cleared.  
 4 Was that recommendation acted upon?  
 5 **A.** Yeah.  
 6 **Q.** And how was that acted upon? Did you hold  
 7 a class or did you send out a memo or did you just  
 8 talk to everybody?  
 9 **A.** Well, I talked to the providers, Kris.  
 10 **Q.** Did you talk to the nurses about it?  
 11 **A.** I didn't.  
 12 **Q.** (Reading): Problem No. 4. No C-collar  
 13 or spine board. Recommendation: Obtain  
 14 C-collar and spine board for clinic.  
 15 How that was recommendation acted upon?  
 16 **A.** It was obtained.  
 17 **Q.** And -- but you already told me you weren't  
 18 sure exactly who did it.  
 19 **A.** Uh-huh.  
 20 **Q.** Okay. Problem No. 5 regarding the  
 21 neurological check, you wrote (reading): All  
 22 nursing orders to be written in order sheet.  
 23 How was that -- was that recommendation  
 24 acted upon?  
 25 **A.** I believe so.

1 handling head and neck injuries?  
 2 **A.** Aware when?  
 3 **Q.** In May of 2013.  
 4 **A.** May of 2013. I know it came up that we  
 5 had to get some education on that.  
 6 **Q.** So who arranged for the education to take  
 7 place?  
 8 **A.** A year later, I don't recall exactly.  
 9 **Q.** Did you attend some type of education  
 10 session?  
 11 **A.** I don't think I was there at the staff  
 12 meeting.  
 13 **Q.** Are you considered to be a clinician or  
 14 clinical staff by Corizon?  
 15 **A.** I would assume so.  
 16 **Q.** Do you have any knowledge as to what  
 17 training occurred when -- on this topic? Do you  
 18 have any --  
 19 **A.** I believe there was an in-service and a  
 20 staff meeting.  
 21 **Q.** And do you know who led this -- the  
 22 training?  
 23 **A.** No.  
 24 **Q.** Do you know what materials were used?  
 25 **A.** I wasn't there, no.



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1 Q. Do you know whether there's any record of  
2 that in-service training?  
3 A. No. I don't know. There may be.  
4 Q. Are you still supervising Ms. White?  
5 A. Yes.  
6 Q. And is she still working at the Lane  
7 County Jail?  
8 A. Yes.  
9 Q. Was she disciplined in any way for her  
10 actions in regard to Mr. Green?  
11 A. I wouldn't say she was disciplined, no.  
12 We talked about improving -- quality of improvement.  
13 I don't know that disciplining was going to do  
14 anything but --  
15 Q. Were you aware that Ms. Mooningham back at  
16 corporate headquarters had determined that Ms. White  
17 had acted recklessly?  
18 MR. COLEMAN: Object to the form of  
19 the question.  
20 A. Not at the time.  
21 BY MR. ROSENTHAL:  
22 Q. So no one's told you -- no one told you  
23 that in 2011?  
24 A. Huh-uh.  
25 Q. Has anyone told you that since then?

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1 A. Yeah.  
2 Q. And do you agree with that?  
3 A. I wouldn't use the term "reckless." I  
4 think there were certainly areas that could have  
5 been improved.  
6 Q. Would you say that she acted negligently?  
7 MR. COLEMAN: Objection.  
8 A. I wouldn't use the word "negligent."  
9 BY MR. ROSENTHAL:  
10 Q. Would you say that she acted carelessly?  
11 A. No. Careless means without care, so, no,  
12 I think she cares about the people she's taking care  
13 of.  
14 Q. So what word would you use to describe her  
15 actions?  
16 A. I think there were some errors in  
17 judgment.  
18 Q. And what errors in judgment?  
19 A. I think that the patient probably should  
20 have been stabilized in a C-collar until further  
21 evaluation was done, whether that was done in the  
22 emergency room -- you know, of course, we know all  
23 this now, hindsight being 20/20 -- but whether it  
24 was done in the emergency room or whether it was  
25 done in the clinic, yeah, probably just been

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1 stabilized better until a more thorough evaluation  
2 could have been done.  
3 Q. Did you think she also made a mistake by  
4 not doing neurological checks of Mr. Green after he  
5 was sent to the jail cell?  
6 A. Her? No. I mean, we rely on nursing  
7 staff to do some evaluations for us.  
8 Q. Do you think she also made a mistake in  
9 leaving the Lane County Jail premises before  
10 Mr. Green was picked up by emergency medical  
11 service?  
12 A. You know, I would have to go back and look  
13 at the exact time frame to do that. We can  
14 certainly go over it, if you'd like.  
15 Q. Well, she clocked out at 4 o'clock and the  
16 ambulance didn't show up until ten to 5:00?  
17 A. And she was aware that he was still there?  
18 Q. Well, when she left, he was still there.  
19 A. What -- I wasn't implying whether or not  
20 he was still there because, of course, the ambulance  
21 came to get him there at a time after she left, but  
22 I recall, you know, looking at some of the stuff  
23 that -- I thought she was under the impression that  
24 he had been sent out, so I don't remember if she was  
25 told he was still there or not.

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1 Q. Well, according to the video, which you  
2 haven't looked at, she was in his jail cell at about  
3 five to 4:00 or ten to 4:00.  
4 A. Okay.  
5 Q. And she left at 4:00. And according to  
6 the records, the ambulance was not called until  
7 4:30. So my question is: Do you think that that  
8 was a mistake in judgment on her part?  
9 A. If she thought he was stable, no. If she  
10 felt he was unstable, then, yes.  
11 Q. And were you aware that -- what his blood  
12 pressure was? I think we talked about it briefly in  
13 your first deposition, that it was 84/62 at -- when  
14 Nurse Smith took his blood pressure. That's what --  
15 she told that to Nurse White before she left,  
16 according to Nurse Smith. And his blood pressure in  
17 the courtroom was 128/84. So would you agree that  
18 that's an unstable patient?  
19 A. I'd have to see what it was prior to that.  
20 We do have people come in with very low blood  
21 pressures. And I would expect it to go up, if  
22 somebody had some sort of endorphin release from  
23 pain or an injury.  
24 If it had been running consistently high  
25 and dropped down, then I would say that that's not a